

<b><u>Application Forms and Attachments</u></b>	<b><u>Page #</u></b>
<b><u>Project Name:</u></b> McMillan School Adaptive Reuse	
<b><u>Project Applicant:</u></b> AMR at Pensacola, Inc.	
<b>Table of Contents (COMPLETENESS CHECKLIST)</b>	<b>1</b>
1. Applicant Information	2-3
2. Project Information	3-4
3. Certification	4
4. Project Description	4-5
5. Quality of Service Questionnaire	6-7
6. Ability to Complete Activities Outline	8
7. Budget Narrative	9
8. Budget and Match Form	9-11
9. Project Outcomes	11-12
10. Required Attachments	12-15 + see zip folder
Affirmation of attendance/viewing of pre-application meeting/video.	completed
a. Documentation of Partnerships – MOUs, Letters of Commitment or Contracts demonstrating location and program services in Escambia County and/or Santa Rosa County	12-15 + see zip folder
b. Applicants Annual Operating Budget	12
c. Proof of 501c3 Status (if applicable)	see zip folder in email
d. Current W-9	see zip folder in email
e. 2022 and 2023 Tax returns	see zip folder in email
f. Two most recent years' financial statements (audited, if applicable)	see zip folder in email

**AMR IS ALREADY ENGAGED IN THE PLANNING PHASE OF THIS DEVELOPMENT. THE EXISTING AND PROPOSED SITE PLANS FOR MCMILLAN SCHOOL ADAPTIVE REUSE ARE ATTACHED TO APPLICATION VIA THE ZIPPED FILE FOLDER.**

**Application Summary of:** AMR AT PENSACOLA, INC. Prepared by Nannette Chandler

**Program Name:** McMillan School Adaptive Reuse

**Application for Grant:** HOME-ARP Escambia County, FL

**1. Applicant Information**

Applicant Name: AMR AT PENSACOLA, INC.	Applicant Telephone: 850.438.4400
Address: 730 BAYFRONT PKWY STE 4B	Authorized Representative Name/Title: Kevin Hagen, President
City, State, Zip: PENSACOLA, FL 32502	Telephone: 850.530.4226
Contact Person Name/Title: Nannette Chandler	Applicant Website: www.amrpensacola.com
Contact Person Email: Nchandler10@gmail.com	Unique Entity ID (SAM#): X1Q6UB7LF7U7
Contact Person Telephone: 850.516.3863	Federal Employer ID #: 59-2940706

**ABOUT AMR AT PENSACOLA, INC.**

AMR AT PENSACOLA, INC, (AMR) is a 501 (c)(3), non-profit organization, and state-certified Community Housing Development Organization (CHDO). As one of Pensacola’s largest non-profit affordable housing organizations, AMR has been involved in the development, preservation, and management of affordable housing throughout the County since 1989. AMR’s story began in the mid-1980s, when the founder, a local real estate attorney and developer, witnessed a growing number of families in need of affordable housing and facing evictions from their homes. He witnessed children living in unsafe conditions and observed that many families had minimal help in accessing affordable housing. It was then that he declared, “We will do better.” Since that time, AMR has engaged in a close working relationship with Escambia County, The City of Pensacola Housing Department, and the Florida Housing Finance Corporation to provide affordable housing and homeownership opportunities for citizens of Pensacola and Escambia County in the State of Florida. Historically, AMR has received grants in the amount of \$106,000 from Impact Pensacola and over \$50,000 from Opening Doors Pensacola for “The Phoenix Project,” a tiny house community development for kids aging out of the Foster Care system. AMR holds the Community Housing Development Organization (CHDO) certification and is set to receive Pensacola State College’s 501 (c)(3) certification in 2025.

AMR has a proven track record of using a scattered site model (fewer than 15 units per site) which has been **inspired** by the concerns over poverty concentration and quality of life for decades as expressed by the U.S. Department of Housing and Urban Development. However, over the last few years an unprecedented amount of homelessness and dire need for low-income housing has been recognized in Escambia County, so AMR has set its sights on a new, **loftier goal**. AMR intends to create low barrier entry housing on a much larger scale to make the difference that Escambia County needs to see. This project will include support services from community partnerships with medical and dental care and mental health services.

AMR is currently expanding operations through The McMillan School Adaptive Reuse Program which includes the adaptive reuse and management of the McMillan School as a low-barrier homeless shelter and low-income rental housing. The idea to develop a hub which provides immediate security and resources for those in need, but also a personal development plan for each person to increase their

financial education, workforce training, and health. This property allows the opportunity for a multi-phase project that addresses not only the most-needed type of housing at the present, but also the ability to create a community of learning and resources to elevate individuals to a higher income level and provide hope for the next steps in life.

**Mission Statement**

AMR at Pensacola, INC. (AMR) assists in the creation and maintenance of a sound industrial base for Escambia County, revitalization of economic health to established commercial areas, and the preservation and rehabilitation of existing residential neighborhoods. AMR provides, conserves, and expands the supply of adequate housing for the low to moderate income residents of Escambia County. AMR supports economic and commercial development activities which provide job opportunities for low to moderate income persons. AMR supports essential public services for low to moderate income families and aids in the prevention and elimination of SLUM AND BLIGHT. AMR undertakes community development needs that have a particular URGENCY because existing conditions pose a serious and immediate threat to the health and welfare of the community.

**Additional Information** – AMR will happily provide a list of all completed and current development projects upon request.

**2. Project Information**

Project Name: McMillan School Adaptive Reuse	
Project Address: 1403 W St Joseph Ave, Pensacola, FL 32501	
This is a/an New Project or Expanded Project: New Project	
Total Funding Requested for this Project: \$2,746,987.00	
Number of Persons to be Served: By use of HOME-ARP funding, 53 rental units will be created that can house up to 110 people. Also, as a by-product of approval, the other 40% of this site and buildings which are already funded through other grants and AMR directly, will be used to install eight (8) tiny houses for young adults aging out of Foster Care and create 30 low-barrier beds for homeless individuals (20 pallet houses and 10 beds in communal setting). In 2026, 60 additional beds for homeless persons will be ready for habitation as well. AMR will then begin developing plans for more affordable housing to be built on the remaining 1.75 acres. This site will be considered a permanent affordable housing site.	
Project Type: The renovation and adaptive reuse of the currently shuttered Henry McMillan School and portable buildings as affordable housing and a low-barrier homeless shelter to address the homelessness and the lack of income appropriate housing in Escambia County. This project will also put this building back into use and breathe new life into a neighborhood with many blighted properties.	
Target Qualifying Population ( <i>check as many as applicable below</i> ):	
<input checked="" type="checkbox"/> Homeless <input checked="" type="checkbox"/> At Risk of Homelessness <input checked="" type="checkbox"/> Fleeing or Attempting to Flee Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking	<input checked="" type="checkbox"/> Unaccompanied Youth (ages 18-24) Who Have Experienced Persistent Instability in Housing <input checked="" type="checkbox"/> Veterans, or Families of Veterans with a Member that Meets the Criteria for one of the Qualifying Populations

Target Service Location ( <i>check as many as applicable below</i> ):	
<input checked="" type="checkbox"/> City of Pensacola, District <u>all</u> <input type="checkbox"/> City of Milton, District _____	<input checked="" type="checkbox"/> Unincorporated Escambia County, District <u>all</u> <input type="checkbox"/> Unincorporated Santa Rosa County District ____ <input type="checkbox"/> Other _____

**3. Certification**

To the best of my knowledge, I certify that the information in this application is true and correct and that the document was duly authorized by the governing body of the applicant. I will comply with the program rules and regulations if assistance is approved. I also certify that I am aware that providing false information on the application can subject the individual signing such application to criminal sanctions. I further certify that I am authorized to submit this application and have followed all policies and procedures of my agency regarding grant application submissions.

Authorized Organization Representative:

Signature: Kevin Hagen

Date: 01/06/2025 01:09 PM

Typed Name: Kevin Hagen

Title: President, AMR at Pensacola, Inc

**4. Project Description**

a. The Site & Scope:

- i. AMR has executed a contract to purchase the Henry McMillan School from the Escambia County School Board. AMR will utilize the main building, portable buildings, and surrounding vacant land to address the most pressing housing needs in Escambia County – LOW AND VERY LOW-INCOME HOUSING AND HOMELESSNESS. This site was chosen specifically because it allows AMR and our community partners to create a truly comprehensive program to help people in each of these categories of need, and it is already a handicapped-accessible building. The scale, location, and provision of supplemental services at this location will provide an immediate and comprehensive solution for those in our community WHO NEED IT MOST. This project will not only provide for immediate needs but will also provide and administer programs to help the tenants progress from homelessness to independent, stable living onsite or at one of our scattered site locations throughout Escambia County and the City of Pensacola. AMR recognizes that nothing that is done on a grand scale is done alone, so we look forward to providing an auditorium and meeting spaces that will be utilized by our community partners to create a hub for growth and recovery through the provision of mental health services, dental and other health related services, education, workforce development training, skilled labor partnerships, seminars, and group therapy gatherings. As a bonus, the remaining 1.75 acres of land on this site allows for future



growth opportunities for the construction of additional low-income housing in the time to come.

b. The Development Plan:

- i. Phase 1 of Site development includes preparation of the two East Wings of the building to provide 51 very low to low-income housing units and the renovation of one of the existing portable classrooms on site to accommodate two more rental units with 2 bedrooms and one bathroom each, for a total of 53 Units. AMR will work directly with the local housing agencies and other organizations to accept voucher tenants for these units. Floorplans will vary in size and layout to accommodate individuals and multi-member households in need. Each unit will include a private bathroom and food preparation area. Tenants will have access to a larger communal kitchen should they choose to utilize it as well as community gardening space, an outdoor exercise area, communal laundry facilities, and all seminars and events held in the auditorium for personal growth, education, and spiritual/religious fulfillment. This phase also includes the renovation and staffing of the administrative and consulting spaces where our partners will provide access to supplemental services including counseling, health services, workforce training, and more.

Also, as a part of Phase 1, but not as part of our funding request, AMR will renovate one of the classrooms in the west wing of the building to become a low-barrier, 10-person communal homeless shelter with an individual bed and locker for each person in need. As an additional housing option on site, AMR will place 20 “Pallet Homes” like those recently acquired by the City of Pensacola on the site. These low barrier individual shelters will be served by a “Pallet Home” restroom facility and these occupants and all those in our low-barrier facilities will have full access to the resources and accessory areas we provide, including the community gardens, laundry facilities, outdoor workout spaces, seminars, group meetings, and more.

- ii. Phase 2 of Site development includes the installation of eight tiny homes as part of “Fresh Start Village Phase 2” which is funded by a FL State Appropriations Committee Grant. The units are earmarked for individuals aging out of the foster care system and learning to live more independently. These tenants will have access to the community gardens, auditorium, and workout areas, as well as the shared laundry facilities. These individuals will also benefit from access to all seminars and events held on site as previously mentioned.
- iii. Phase 3 of the Site development includes the renovation of the portable buildings on site into 5-10 family-oriented housing units. This portion of the development will take place in 2026 or sooner, if the funds are raised beforehand, but should be considered a future endeavor, separate from our application herein.
- iv. Phase 4 of Site Development includes the renovation of the eight remaining classrooms in the west wing of the building into eight additional low-barrier, communal housing spaces with 10 beds per room for the benefit of 80 future individuals. Like Phase 1, each person will also have a locker and access to all site amenities and services. This Phase will be funded by a mix of future grant money and private funding, but NOT with funds from this grant request. This phase will be underway in 2026 or sooner, with separate grant approval.

## 5. Quality of Service Questionnaire

### a. Describe how the project aligns with Escambia HOME Consortium HOME-ARP Allocation Plan.

- i. After a year of market and site research AMR has come to the same conclusion as Escambia HOME Consortium – we need to provide a comprehensive solution to the housing crisis being experienced for the low income and homeless population. Escambia County is actually losing low-income rentals as the need for them grows. That’s the reason AMR has decided to pivot from smaller housing development (15 units or less) to the development of a property that will be a CATALYST for change in Escambia County. The ability to provide the number of units proposed is only possible in this budget range because of our developmental approach includes reusing an existing structure and to create space for collaboration with those who already do such a great job in their current roles with support services. Our plan includes working in concert with these organizations to increase the job skills, financial education, and confidence of those in the Low-income bracket so that those who are able bodied will not feel stuck in that income bracket forever.

### b. Explain how your agency is actively participating in the Homeless Continuum of Care (CoC) and existing HMIS and Coordinated Entry systems in the Consortium service area, and how this project will integrate with those.

- i. AMR will continue its existing partnerships and engage in some new ones with organizations that have a proven record to bring our common mission to a state of success. For nearly three years, AMR has partnered with The Lakeview Center to provide housing and stability for Unaccompanied Youth through “The Phoenix Project,” which bridges the gap from Foster Care to Adulthood for Unaccompanied Adults, but there is much more need. AMR will continue to integrate this program with the eight tiny houses on this site earmarked for these young adults, but there are so many other individuals with whom we are excited to continue this outreach including our homeless and veteran populations. To reach people in larger numbers AMR will utilize the auditorium, which this unique location offers, to hold classes, seminars, workforce training, and recovery group sessions for the welfare of our tenants. AMR is also directly funding the costs for the first of nine communal spaces for the low-barrier shelter to connect tenants to in-house resources for success. These resources will also be available to all of our low-income tenants on site.

### c. Describe how the project will provide connections to supportive solutions and include the extent to which this project will connect client to mainstream services (i.e. food stamps, SSI/SSDI, Medicare/Medicaid, physical health care, mental health care, substance abuse treatment, recovery support groups, public housing, childcare providers, etc.) to ensure long-term stability.

- i. AMR will provide the housing and consultation spaces on site for tenants to meet with support staff from many different organizations and will provide and/or coordinate transportation to and from doctor and specialty appointments off-site. Attached to this application you will find letters of support from our community partners, including The LifeView Group, A Families

First Network Affiliate, and Re-Entry Alliance Pensacola, which will provide a wealth of such resources to our tenants. We don't need to recreate the wheel here; we will instead cultivate more interagency cooperation for the benefit of our tenants. The AMR Administrator will act as liaison for all communication needed between tenants and support services.

**d. Describe how your agency has worked to remove traditional barriers (i.e. no income, no insurance, no transportation, etc.) to provide services for individuals and families who are members of the qualifying populations.**

- i. AMR has been in the business of providing low-income housing for nearly 40 years, and it is our intention to double-down on that current need. We will focus on what we do best and partner with the best service-based organizations to carry out the full scope of our plan. In this way, service-related funds will go further and not be diluted between too many organizations. There are resources available and it is our job to connect our tenants to them to begin the steps towards health and financial independence.

**e. Describe how your agency evaluates program success.**

- i. The design AMR has chosen to pursue at the former McMillan School is one that is all-inclusive and spun from the desire to help every person who walks through the doors elevate their current circumstances. The path to success will look different for each tenant, as some will need to take more steps than others. AMR's place is in providing shelter for all, thereby allowing each person a respite to contemplate the next step to improve their lives. This program and its community partners will then provide onsite access to the resources to make those progressive steps toward independent living a reality. Ultimately, success is seeing those struggling who experience housing and income insecurity be able to live on their own after completing all the steps in their individual path to success. The AMR program aims to systematically graduate tenants from homelessness to financial, workforce, and housing security. This facility is not meant to house the same people indefinitely, but to provide a safe space for transformation of lives over a 12-month period or longer if needed. The impact that a center like this will have on the reduction of homelessness throughout the Pensacola Community will be tremendous.

**f. Describe how the agency will continue to provide quality services in the community in the case of reduced or loss of funding, after the funding has ended.**

- i. As demonstrated by the attached proforma, the McMillan School Adaptive Reuse Program will be self-sustainable by rents collected from the tenants themselves. There will be no need for additional funding until we engage in the expansion of housing on the site.

## 6. Ability to Complete Activities Outline

- a. H+H Building Group has been selected as the Construction Manager for the current project. Kevin Hagen, President of H+H Building Group, also serves as the President of AMR at Pensacola Board of Directors. Since 2009, Kevin has served over 200 hours to AMR's continuing operation by providing advice, inspections, and construction services to AMR Staff and management. Examples include finding quality tradesmen to perform maintenance work on AMR properties, reviewing potential build sites and designs, drawing preliminary plans, and attending County workshops and meetings. In addition to providing these pre-construction services to AMR for this project, H+H Building Group will complete all of the construction services at a profit margin of ZERO. There will also be no developer fee and no contractor fee for this project, as noted in the proposed budget. H+H and Kevin are fully committed to furthering the legacy of AMR and this project is vital to that legacy.
- b. Timelines, drawn-down schedule, and reporting schedules:
  - i. Timeline: 45 days – FUNDS needed \$696,000 (AMR to fund gap)
    1. Completion Purchase of Property
  - ii. Timeline: 3 months – FUNDS needed \$255,000
    1. Design, Engineering, and Permitting of Construction Projects
  - iii. Timeline: 6 weeks – FUNDS needed \$0 (AMR to Fund Directly)
    1. Completion of Low- Barrier Homeless Shelter co-habitation spaces which include a bed, secure storage locker for each person, and a communal kitchen.
  - iv. Timeline 9-12 months – FUNDS needed \$1,585,987
    1. Completion of 51 new low-income rental units under the roof of the School, community garden and outdoor recreation spaces. Completion of 8 new construction tiny homes for affordable self-sufficient rentals. Completion of renovations to one portable classroom into 2 individual rental units. Complete installation of 20 pallet houses and one communal housing area serving 10 people. *Note: Pallet houses, communal housing, and tiny homes will be funded by other grants and private funding sources.*
  - v. Timeline 6 months – FUNDS needed \$210,000
    1. Start-up of rental program

## 7. Budget Narrative

- a. We have extensive experience in the development of housing units. AMR owns and operates over 150 units in various forms. Over 90% of those units were originally developed by AMR. Recently we completed the development and construction of our first “Phoenix Project” location. This property is a group of 7 tiny homes and a community building that is occupied by young adults that have aged out of the foster care system. Regarding this project, we have completed conceptual designs for the renovations of the existing building. We have taken multiple tradespeople through the existing building to get ideas about the costs of the renovations. AMR has clearly identified the costs for this project. Per the attached letter, Smart Bank is positioned to provide lending support for the project. The construction budget is attached with the other required documents.

## 8. Budget Form

<b>Year 1 Funding</b>		
<b>Eligible Costs</b>	<b>Quantity &amp; Description</b>	<b>Assistance Requested</b>
Land Costs and Development of Affordable Rental Housing	This funding will comprise 60% of the Purchase price for the Real Property at 1403 W St Joseph Ave (\$696,000) and the renovation funding for the school located on said to create 53 affordable housing units serving low to very low-income people.	\$2,536,987.00
<b>Subtotal Requested</b>		\$2,536,987.00
<b>Admin Requested (max of 10%)</b> (i.e. accounting costs, contract mgmt. costs, facility costs)		\$210,000.00
<b>Total Amount Requested</b>		\$2,746,987.00

# McMillan Adaptive Reuse Housing Budget

Item	Costs	Comment	Other Sources
<b>Property Acquisition and Soft Costs</b>			
Land Costs and Building Acquisition	\$1,160,000	60% of Property is for this project-remaining property for other housing uses- Gap is funds by a mortgage- see Smart Bank letter	\$464,000
Design Fees	\$68,500	Architect and Engineers	
Appraisal Fees	\$5,000		
Construction Loan Fees and Interest	\$49,500	5.5% APR for portion of costs not funded	
Environmental Engineering Fees	\$3,500		
Impact/Utility Fees	\$104,500	Connection to existing and Upgrading Infrastructure	
Building Permits	\$24,000		
<i>Total Costs Property Acquisition+Soft Costs</i>	<b>\$1,415,000</b>		\$464,000
<b>Renovation of Existing Main Building Phase 1</b>			
General Conditions of Construction	\$60,000		
Selective Demolition	\$12,250		
Concrete Removal and Replacement	\$24,000		
Cabinets + Counters, Interior Trim	\$255,200		
Exterior Doors and Windows	\$88,740		
Drywall Assemblies (Partition Walls + Ceilings)	\$128,000		
Flooring & Tile	\$26,320		
Painting & Sealants	\$61,200		
Misc Specialties and Bath Accessories	\$11,220		
Appliances	\$50,000		
HVAC Modifications	\$23,500		
Plumbing	\$457,887		
Electrical	\$178,500		
Structured Cabling	\$34,170		
General Contractor Overhead (\$0 profit)	\$75,000		
<i>Total Construction Cost-Renovations</i>	<b>\$1,485,987</b>		
<b>Construction Costs for 8 Tiny Homes Phase 1</b>			
<i>Total Costs-Tiny Homes</i>	<b>\$660,000</b>	Matching State Grant in Hand for \$660,000	\$660,000
<b>Renovation of Existing Portable Classroom-1 Unit</b>			
General Conditions of Construction	\$10,000		
Selective Demolition	\$3,000		
Cabinets + Counters, Interior Trim	\$21,000		
Exterior Doors and Windows	\$3,000		
Drywall Assemblies	\$6,000		
Flooring & Tile	\$4,000		
Painting & Sealants	\$2,500		
Misc Specialties and Bath Accessories	\$500		
Appliances	\$5,000		
HVAC	\$5,000		
Plumbing	\$21,000		
Electrical	\$10,000		
Structured Cabling	\$1,000		
General Contractor Overhead (\$0 profit)	\$8,000		-
<i>Total Costs Portable-1 Unit</i>	<b>\$100,000</b>		
<b>Administrative Costs</b>			
<b>\$210,000</b>			
<b>TOTAL COST</b>		<i>Grant Request for Development of Affordable Housing Units</i>	<b>\$1,124,000</b>
		<b>\$2,746,987</b>	
1/6/25 9:17AM			

## 9. Project Outcomes

<b>Performance Measure</b>	<b>Baseline Data (must include source)</b>	<b>Desired Outcome</b>	<b>Describe the project component(s) that will be used, and how the outcome will be achieved and monitored</b>
53 permanent units rented to low and very low-income applicants	Comprehensive Housing Affordability Strategy (CHAS) data documenting the extent of housing problems and housing needs, particularly for low income households, at the County level. Households at 30, 50 and 80% of median income levels experience the highest instances of housing insecurity. Data.HUD.Gov	Provide housing solutions as quickly as possible for citizens at and below 30-50% Median Income for Escambia County. Reduce demand for affordable housing units by increasing permanent supply of such units. Make project self-sustainable in Year 1 of completion.	53 rental units will be created for use by those who meet income requirements and/or have obtained vouchers through HUD
Eight Tiny homes for Unaccompanied Youth (these young people will receive the benefits of the project outcome without any funding from this grant)	Unaccompanied homeless youth are at increased risk of developing physical and mental health problems. They are also unable to access routine medical care, which can lead to serious health hazards. Unaccompanied youth are particularly vulnerable to victimization and exploitation, and there a few Counties in FL who accept them. Shimberg Center, FL Housing Coalition	Provide a safe place to begin building an adult life with resources available for success. Make project self-sustainable in Year 1 of completion.	Construction of 8 tiny houses on site paid for with grant match funding, in addition to providing mental, physical, and financial support and education services through our Community Partners.



**Proforma Year 1 of Operation (Post Construction)**

**McMillan School Adaptive Reuse**

UNIT PRICING INLCUDES ALL UTILITIES

<b>Income</b>	<b>Number of Units</b>	<b>Avg Monthly Rent Per Unit</b>	<b>Total Monthly Rent Per Type</b>	<b>Total Yearly Rent Per Type</b>
1 Bed SE Units (20)	20	\$ 475.00	\$ 9,500.00	\$ 114,000.00
1 Bed Efficiency (15)	15	\$ 550.00	\$ 8,250.00	\$ 99,000.00
1 Bed Unit (16)	16	\$ 625.00	\$ 10,000.00	\$ 120,000.00
2 Bed Unit (2)	2	\$ 1,600.00	\$ 3,200.00	\$ 38,400.00
Bunks (90)	90	\$ 150.00	\$ 13,500.00	\$ 162,000.00
8 Tiny Homes	8	\$ 1,300.00	\$ 10,400.00	\$ 124,800.00
<b>Total Monthly Income at 100% Occupancy</b>			\$ 54,850.00	\$ 658,200.00
<b>Total Monthly Income at 90% Occupancy</b>			\$ 49,365.00	\$ 592,380.00
<b>Total Monthly Income at 80% Occupancy</b>			\$ 43,880.00	\$ 526,560.00

<b>Expenses</b>	<b>Avg Monthly Cost</b>	<b>Total Yearly Cost</b>
Administrative Staff	\$ 7,500.00	\$ 90,000.00
Security	\$ 11,000.00	\$ 132,000.00
Utilities	\$ 8,500.00	\$ 102,000.00
Janitorial/Linen Services	\$ 2,400.00	\$ 28,800.00
Grounds Maintenance	\$ 2,000.00	\$ 24,000.00
Building Maintenance	\$ 600.00	\$ 7,200.00
Debt Service	\$ 3,724.61	\$ 44,695.32
Taxes	\$ 1,000.00	\$ 12,000.00
Insurance	\$ 2,000.00	\$ 24,000.00
Maintenance Escrow	\$ 500.00	\$ 6,000.00
<b>Total Monthly Expenses</b>	<b>\$ 39,224.61</b>	<b>\$ 470,695.32</b>

<b>Net Profit (100% Occupancy)</b>	\$ 15,625.39	\$ 187,504.68
<b>Net Profit (90% Occupancy)</b>	\$ 10,140.39	\$ 121,684.68
<b>Net Profit (80% Occupancy)</b>	\$ 4,655.39	\$ 55,864.68



1221 W. Lakeview Ave.  
Pensacola, FL 32501  
LifeViewGroup.org

January 5, 2025

To whom it may concern,

FamiliesFirst Network provides the foster care services for the State of Florida, which includes case management services for young adults aging out of the system. In that life transition, finding safe, affordable housing is a challenge that our case managers face when supporting our young adults. While these individuals do have some limited resources to pay rent, the lack of affordable options make finding appropriate housing very difficult. AMR Pensacola responded to that challenge in 2024 by developing a tiny home community. Fresh Start Village is a development of 7 tiny homes and includes a community building with meeting and gathering spaces. Our young adults have been tenants in this community since its completion in the Fall and have been able to live in clean, safe, affordable housing as they move into adulthood. AMR was responsive to the unique needs of young adults aging out of foster care and made many improvements and enhancement in the Fresh Start Village design to accommodate those unique needs. We are appreciative of the resources they made available to our young adults and look forward to future opportunities.

FamiliesFirst Network works with our sister organization, Lakeview Center, Inc., in providing behavioral health services to the community. As the area's community mental health center, Lakeview Center works with community partners like AMR Pensacola to ensure coordination and access to mental health and substance abuse services.

Please accept this letter of support for the housing project currently being pursued by AMR Pensacola.

Sincerely,

M. Allison Hill

CEO

LifeView Group, Inc.



## RE-ENTRY ALLIANCE PENSACOLA, INC.

P.O. Box 13224  
(850) 332-6677

Pensacola, Florida 32591  
[www.reapreentry.org](http://www.reapreentry.org)

Vinnie Whibbs, Executive Director

Rich Lynch, Director of Operations

December 30, 2024

By email to Nannette Chandler

Re: Letter of Support/MOU for AMR at Pensacola, Inc.

Dear Ladies and Gentlemen:

Please consider this letter as confirmation of Re-Entry Alliance Pensacola, Inc.'s full support of AMR at Pensacola, Inc.'s grant application submitted to the Escambia Consortium NOFA HOME-American Rescue Plan for the development of Affordable Rental Housing. REAP is also applying for this NOFA, with REAP's application primarily directed at providing supportive services at various locations. We see this as an opportunity for collaborative actions to serve the homeless population in the Escambia Consortium's targeted area between REAP and AMR and look forward to future opportunities in this regard.

Sincerely,

*Vince Whibbs, Jr.*

Vince Whibbs, Jr.  
Executive Director, Re-Entry Alliance Pensacola, Inc.



**SmartBank.**

January 03,2025

Mr. Kevin Hagan  
President-AMR of Pensacola, Inc.  
730 Bayfront PKY.  
Pensacola, Fl. 32502

Mr. Hagan:

SmartBank appreciates the opportunity of working with AMR of Pensacola on the proposed project associated with the rehabilitation of the old McMillan School building in Pensacola. The scope of the project appeals to SmartBank as a possible Community Development opportunity that we would consider after a due diligence and approval process. As of this date, SmartBank has not had the opportunity to review pertinent financial or construction specifics to determine the feasibility of conforming to SmartBank underwriting criteria for approval. Therefore, we express an interest in moving forward to obtaining all necessary information to perform a thorough underwriting process. Again, we appreciate your interest in SmartBank. As noted, once SmartBank has the ability to review and underwrite the request a determination will be extended as to SmartBank's approval or denial.

Respectfully,

Johnnie Wright  
Regional President

[WWW.SMARTBANK.COM](http://WWW.SMARTBANK.COM)

# McMillan Adaptive Reuse Housing Budget

Item	Costs	Comment	Other Sources
<b>Property Acquisition and Soft Costs</b>			
Land Costs and Building Acquisition	\$1,160,000	60% of Property is for this project-remaining property for other housing uses- Gap is funds by a mortgage- see Smart Bank letter	\$464,000
Design Fees	\$68,500	Architect and Engineers	
Appraisal Fees	\$5,000		
Construction Loan Fees and Interest	\$49,500	5.5% APR for portion of costs not funded	
Environmental Engineering Fees	\$3,500		
Impact/Utility Fees	\$104,500	Connection to existing and Upgrading Infrastructure	
Building Permits	\$24,000		
<i>Total Costs Property Acquisition+Soft Costs</i>	<b>\$1,415,000</b>		\$464,000
<b>Renovation of Existing Main Building Phase 1</b>			
General Conditions of Construction	\$60,000		
Selective Demolition	\$12,250		
Concrete Removal and Replacement	\$24,000		
Cabinets + Counters, Interior Trim	\$255,200		
Exterior Doors and Windows	\$88,740		
Drywall Assemblies (Partition Walls + Ceilings)	\$128,000		
Flooring & Tile	\$26,320		
Painting & Sealants	\$61,200		
Misc Specialties and Bath Accessories	\$11,220		
Appliances	\$50,000		
HVAC Modifications	\$23,500		
Plumbing	\$457,887		
Electrical	\$178,500		
Structured Cabling	\$34,170		
General Contractor Overhead (\$0 profit)	\$75,000		
<i>Total Construction Cost-Renovations</i>	<b>\$1,485,987</b>		
<b>Construction Costs for 8 Tiny Homes Phase 1</b>			
<i>Total Costs-Tiny Homes</i>	<b>\$660,000</b>	Matching State Grant in Hand for \$660,000	\$660,000
<b>Renovation of Existing Portable Classroom-1 Unit</b>			
General Conditions of Construction	\$10,000		
Selective Demolition	\$3,000		
Cabinets + Counters, Interior Trim	\$21,000		
Exterior Doors and Windows	\$3,000		
Drywall Assemblies	\$6,000		
Flooring & Tile	\$4,000		
Painting & Sealants	\$2,500		
Misc Specialties and Bath Accessories	\$500		
Appliances	\$5,000		
HVAC	\$5,000		
Plumbing	\$21,000		
Electrical	\$10,000		
Structured Cabling	\$1,000		
General Contractor Overhead (\$0 profit)	\$8,000	-	
<i>Total Costs Portable-1 Unit</i>	<b>\$100,000</b>		
<b>Administrative Costs</b>			
<b>\$210,000</b>			
<b>TOTAL COST</b>	<b>\$3,870,987</b>	<i>Grant Request for Development of Affordable Housing Units</i>	<b>\$1,124,000</b>
1/6/25 9:17AM		<b>\$2,746,987</b>	

FFE BUDGET				
Backpack Buddies	\$	17,250.00		
Church to Church Food Ministry	\$	62,050.00		
Operation Christmas Child	\$	136,750.00		
Sewing for Jesus	\$	23,750.00		
TOTAL	\$	239,800.00		

P. 02

OCT-23-94 SUN 19:41 JIM REEVES

904 968 4888

P. 01

INTERNAL REVENUE SERVICE  
DISTRICT DIRECTOR  
401 W. PEACHTREE ST. NW  
ATLANTA, GA 30366

DEPARTMENT OF THE TREASURY

Date: APR 06 1994

AMR AT PENSACOLA INC  
780 BAYFRONT PKWY SUITE 4-B  
PENSACOLA, FL 32801-6252

Employer Identification Numbers  
59-294070A  
Base Number:  
664058021  
Contact Person:  
LORETTA HAMILTON  
Contact Telephone Number:  
(404) 331-0927  
Addendum Applies:  
No

Dear Applicants

Based on the information you recently submitted, we have classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Internal Revenue Code because you are described in sections 507(a)(1) and 170(b)(1)(A)(vi).

Your exempt status under section 501(a) of the Internal Revenue Code as an organization described in 501(c)(3) is still in effect.

This classification is based on the assumption that your operations will continue as you have stated. If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status.

This supersedes our letter dated January 18, 1994.

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, on the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(1) organization.

If we have indicated in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help resolve any questions about your private foundation status, you should keep it in your permanent records.

PHONE #  
FAX #  
MICHELLE HAMILTON



Letter 1078 (00/00)

OCT-23-94 SUN 19:41 JIM REEVES

904 968 4888

P.02

-2-

ARR AT PENSACOLA INC

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours,

*Helson A. Brooks*  
 Helson A. Brooks  
 District Director



**SmartBank**

January 03,2025

Mr. Kevin Hagan  
President-AMR of Pensacola, Inc.  
730 Bayfront PKY.  
Pensacola, Fl. 32502

Mr. Hagan:

SmartBank appreciates the opportunity of working with AMR of Pensacola on the proposed project associated with the rehabilitation of the old McMillan School building in Pensacola. The scope of the project appeals to SmartBank as a possible Community Development opportunity that we would consider after a due diligence and approval process. As of this date, SmartBank has not had the opportunity to review pertinent financial or construction specifics to determine the feasibility of conforming to SmartBank underwriting criteria for approval. Therefore, we express an interest in moving forward to obtaining all necessary information to perform a thorough underwriting process. Again, we appreciate your interest in SmartBank. As noted, once SmartBank has the ability to review and underwrite the request a determination will be extended as to SmartBank's approval or denial.

Respectfully,

Johnnie Wright  
Regional President



1221 W. Lakeview Ave.  
Pensacola, FL 32501  
LifeViewGroup.org

January 5, 2025

To whom it may concern,

FamiliesFirst Network provides the foster care services for the State of Florida, which includes case management services for young adults aging out of the system. In that life transition, finding safe, affordable housing is a challenge that our case managers face when supporting our young adults. While these individuals do have some limited resources to pay rent, the lack of affordable options make finding appropriate housing very difficult. AMR Pensacola responded to that challenge in 2024 by developing a tiny home community. Fresh Start Village is a development of 7 tiny homes and includes a community building with meeting and gathering spaces. Our young adults have been tenants in this community since it's completion in the Fall and have been able to live in clean, safe, affordable housing as they move into adulthood. AMR was responsive to the unique needs of young adults aging out of foster care and made many improvements and enhancement in the Fresh Start Village design to accommodate those unique needs. We are appreciative of the resources they made available to our young adults and look forward to future opportunities.

FamiliesFirst Network works with our sister organization, Lakeview Center, Inc., in providing behavioral health services to the community. As the area's community mental health center, Lakeview Center works with community partners like AMR Pensacola to ensure coordination and access to mental health and substance abuse services.

Please accept this letter of support for the housing project currently being pursued by AMR Pensacola.

Sincerely,

M. Allison Hill

CEO

LifeView Group, Inc.



Re-Entry Alliance  
Pensacola, Inc.

## RE-ENTRY ALLIANCE PENSACOLA, INC.

P.O. Box 13224  
(850) 332-6677

Pensacola, Florida 32591  
[www.reapreentry.org](http://www.reapreentry.org)

Vinnie Whibbs, Executive Director

Rich Lynch, Director of Operations

December 30, 2024

By email to Nannette Chandler

Re: Letter of Support/MOU for AMR at Pensacola, Inc.

Dear Ladies and Gentlemen:

Please consider this letter as confirmation of Re-Entry Alliance Pensacola, Inc.'s full support of AMR at Pensacola, Inc.'s grant application submitted to the Escambia Consortium NOFA HOME-American Rescue Plan for the development of Affordable Rental Housing. REAP is also applying for this NOFA, with REAP's application primarily directed at providing supportive services at various locations. We see this as an opportunity for collaborative actions to serve the homeless population in the Escambia Consortium's targeted area between REAP and AMR and look forward to future opportunities in this regard.

Sincerely,

*Vince Whibbs, Jr.*

Vince Whibbs, Jr.

Executive Director, Re-Entry Alliance Pensacola, Inc.



## AMR AT PENSACOLA, INC.

### Quarterly Meeting Minutes

October 24, 2024

#### Board Members Present

Kevin Hagen, President; Hal George, Vice President; Alicia Christy, Secretary/Treasurer (via Zoom); Jim Warwick; Dr. Maggie Davis; Dr. Cedric Alexander; Vic Bindi

Others present: James J. Reeves, Legal Counsel; Cara Morris, staff; Kelly Hays, staff; Eric Nicholson, staff; Kelly Price, staff.

Absent: Gus Allen; Katin Davis.

Mr. Hagen called the meeting to order at 3:09 PM.

#### Minutes

The Quarterly Meeting Minutes from July 25, 2024, were unanimously approved as distributed.


#### Discussion of Financial Statements

- The Financials through August 2024 were unanimously approved as distributed.
- Audited Financials:
  - Josh Durst with Durst Jordan, the auditor presented the final Audited Financial Statements for the Fiscal Year End June 30, 2024. He stressed that AMR has a very tight turnaround for the completion of the audit. He explained the process and the requirements by the State that they must address and what they look at when they are auditing review the financial data. The added assets were reviewed according to the revenue performance. AMR is in line with industry guidelines.
  - There are individual projects that are operating at a deficit balance, but this balance out on the consolidated levels.

 850.438.4400

 [jjr@jjrfirm.com](mailto:jjr@jjrfirm.com)

 <https://amrpensacola.com>

 730 Bayfront Pkwy, Ste 4B, Pensacola FL 32502



- All invoices really need to have internal approvals, and the checks need to have the signature and corresponding initial from Mr. Reeves. This is a facet that needs to be addressed for future impact.
- In-kind donations need to be documented and reflected in the financials and be accounted for.
- The final audited financials as presented were unanimously accepted and approved.

### Management Report:

- Eric Nicholson's report:
  - Maintenance and Vacancy Report
    - 410-A Lloyd is severely damaged. The tenant has been evicted but the cost to repair and renovate the unit will cost roughly \$10-15,000. We will not be able to charge the market rate due to the high crime in the area.
    - HVAC Repair has been up as the units are aging and in need of replacement. Money will need to be set aside for this expense.
    - There have been power surges burning up the busses on the electric panels that have cost us a lot of money. Kevin has suggested that we purchase voltage meters to monitor the surges so that we can address the issue so that we can address the issue. Kelly and Eric will investigate the issue.
    - 469-A and B S. L St. We have an employee who wants to rent 469-A S. L St.
    - 1911-A N. 7<sup>th</sup> Ave.
    - 1116-A Wayne Ave.
  - Preventative Maintenance Update:
    - Eric showed the board members graphs and printouts of the software.
    - The maintenance employees have noticed more issues to address such as vines and overgrowth that they are taking the initiative to address.
- AMR Board Member Portal:
  - In lieu of board software that could cost \$3-5,000, we asked the website company to create a private access as a board portal. The link and password will be distributed to the board.
- Kia Soul 2015 Update on Claim Payout: the runner vehicle was totaled during an accident. AMR received \$8,647.00 from Auto-Owners. This asset will now be deleted from the Fixed Asset list.

 850.438.4400

 [jjr@jjrfirm.com](mailto:jjr@jjrfirm.com)

 <https://amrpensacola.com>

 730 Bayfront Pkwy, Ste 4B, Pensacola FL 32502



### **New Business:**

- Florida Department of Commerce Grant of \$660,000.00:
  - AMR has received funds to build eight more tiny homes as part of the Fresh Start Village Phase II.
  - The ideal location would be the property adjoining the Fresh Start Village. The land is owned by Baptist, but it is not available yet but may be available in March of 2025.
  - The site is not determined yet.
  - Kevin called for a motion to be made, and the Board unanimously approved that AMR should accept the money.
- Succession Planning: the board needs to begin considering hiring a part-time executive director to help AMR reach new goals as it expands.
- Review of Strategic Plan: The Board reviewed the Strategic Plan and unanimously approved and adopted the policy.
- Review and approval of Procurement Policy: The Board reviewed the Procurement Policy and unanimously approved and adopted the policy.
- Review and approval of Gift Acceptance Policy: The Board reviewed the Gift Acceptance Policy and unanimously approved and adopted the policy.
- Review and approval of Investment Policy: The Board reviewed the Investment Policy and unanimously approved and adopted the policy.


### **Old Business:**

- McMillan School:
  - AMR put a \$100,000 binder on the McMillan School, and we are currently in the due diligence period. The school was operational as of last year, so the focus of the due diligence period is focused on obtaining the funding to pursue this project. The School Board wants to sell it for \$1,140,000.00. Kevin has requested an extension on the due diligence period while we continue the search for funds.
  - Funding:
    - We have asked Senator Gaetz for \$2.2 million, which would help purchase the school at \$1.1 million and an additional \$1.1 million for construction. There is a State Appropriation, which will not come into effect until July 1, 2025, and is subject to the Governor's veto.
    - The County has put out a notice of \$61.7 million in American Rescue Plan Act (ARPA) funds available for affordable housing. The funds will be available on February 1, 2026, and applications need to be submitted by January 2025.

 850.438.4400

 [jjr@jjrfirm.com](mailto:jjr@jjrfirm.com)

 <https://amrpensacola.com>

 730 Bayfront Pkwy, Ste 4B, Pensacola FL 32502





- Mr. Reeves showed the plans for how the school would be used as a homeless intake center with common rooms for men and common rooms for women. In addition, part of the buildings can be individual rooms for those who have graduated through the system. The American Rescue Plan Act (ARPA) funds do not allow for group housing. There must be individual bathrooms, not communal bathrooms.
- We are trying to find a plan that fits the exact requirements so that we can obtain the funding required.
- If this project is successful, it will need to be operated by a third party. There are no plans for operational staff or management companies yet.
- Cedric mentioned the potential challenges of handling the mental and security issues we will face when dealing with the homeless population.
- Mr. Reeves responded that when legislature mandated sleeping in public spaces as illegal, they mandated that facilities need to be built with mental health facilities, security, and facilities, but no funding was appropriated for this to happen.
- Maggie raised the question whether the County would be willing to operate the facility.
- Mr. Reeves stated that he is informing the board of the options presented to AMR so that they will be aware of the facts before them. He further stated that a time in the near future might come when AMR will need to take a risk, and the board will need to be informed and ready to act at a moment's notice so that opportunities for AMR's growth will not be lost due to inaction and indecision.

#### Other Business

- Next board meeting is in January 2025. The date will be determined.

With no further business to discuss, the meeting was adjourned at 4:34 PM.

Submitted by:

Alicia Christy, Secretary

 850.438.4400

 [jjr@jjrfirm.com](mailto:jjr@jjrfirm.com)

 <https://amrpensacola.com>

 730 Bayfront Pkwy, Ste 4B, Pensacola FL 32502

## Proforma Year 1 of Operation (Post Construction)

### McMillan School Adaptive Reuse

UNIT PRICING INLCUDES ALL UTILITIES

<b>Income</b>	<b>Number of Units</b>	<b>Avg Monthly Rent Per Unit</b>	<b>Total Monthly Rent Per Type</b>	<b>Total Yearly Rent Per Type</b>
1 Bed SE Units (20)	20	\$ 475.00	\$ 9,500.00	\$ 114,000.00
1 Bed Efficiency (15)	15	\$ 550.00	\$ 8,250.00	\$ 99,000.00
1 Bed Unit (16)	16	\$ 625.00	\$ 10,000.00	\$ 120,000.00
2 Bed Unit (2)	2	\$ 1,600.00	\$ 3,200.00	\$ 38,400.00
Bunks (90)	90	\$ 150.00	\$ 13,500.00	\$ 162,000.00
8 Tiny Homes	8	\$ 1,300.00	\$ 10,400.00	\$ 124,800.00
Total Monthly Income at 100% Occupancy			\$ 54,850.00	\$ 658,200.00
Total Monthly Income at 90% Occupancy			\$ 49,365.00	\$ 592,380.00
Total Monthly Income at 80% Occupancy			\$ 43,880.00	\$ 526,560.00

<b>Expenses</b>	<b>Avg Monthly Cost</b>	<b>Total Yearly Cost</b>
Administrative Staff	\$ 7,500.00	\$ 90,000.00
Security	\$ 11,000.00	\$ 132,000.00
Utilities	\$ 8,500.00	\$ 102,000.00
Janitorial/Linen Services	\$ 2,400.00	\$ 28,800.00
Grounds Maintenance	\$ 2,000.00	\$ 24,000.00
Building Maintenance	\$ 600.00	\$ 7,200.00
Debt Service	\$ 3,724.61	\$ 44,695.32
Taxes	\$ 1,000.00	\$ 12,000.00
Insurance	\$ 2,000.00	\$ 24,000.00
Maintenance Escrow	\$ 500.00	\$ 6,000.00
<b>Total Monthly Expenses</b>	<b>\$ 39,224.61</b>	<b>\$ 470,695.32</b>

Net Profit (100% Occupancy)	\$ 15,625.39	\$ 187,504.68
Net Profit (90% Occupancy)	\$ 10,140.39	\$ 121,684.68
Net Profit (80% Occupancy)	\$ 4,655.39	\$ 55,864.68

Approved for legal content: 8/2/2024



Geoff Brodersen, Contract Counsel  
Escambia County School Board

## SALES AGREEMENT

**THIS SALES AGREEMENT** ("Agreement") dated as of the date the last principal to this Agreement executes the same (the "Effective Date"), by and between **THE SCHOOL BOARD OF ESCAMBIA COUNTY, FLORIDA** with an address of 75 North Pace Blvd., Pensacola, Florida 32505 (the "Seller"), and **AMR AT PENSACOLA, INC.**, a Florida corporation, whose address is 730 Bayfront Parkway, Suite 4A, Pensacola, FL 32502 (the "Buyer").

1. **SALE AND PURCHASE.** Seller agrees to sell, assign, transfer, and convey to Buyer, and the Buyer agrees to purchase from Seller the following:

A. The real property in fee simple, situated generally at 1403 W. St. Joseph Avenue in Escambia County, Florida, and as more particularly described and depicted on Exhibit "A" attached hereto and by this reference made a part hereof.

B. All improvements, appurtenances, rights, easements, right-of-way, tenements, and hereditaments incident thereto and all title and interest, if any, of Seller in and to all strips and gores and any land lying in the bed of any street.

C. Unless the context clearly requires otherwise, the property described in Paragraphs 1A and 1B are collectively called the "Property."

D. The Property is sold by Seller and accepted by Buyer in its "AS IS" condition, with all faults. In no event shall Seller have any obligation to perform or pay for any repairs or maintenance to or on the Property.

2. **SALES PRICE AND PAYMENT.** In consideration of the conveyance of the Property to Buyer, Buyer shall pay to Seller the sum of **One Million One Hundred Sixty Thousand and 00/100 Dollars** (\$1,160,000.00) (the "Purchase Price"), payable to Seller and which shall be paid to Seller as follows:

A. A deposit of **One Hundred Thousand Dollars and 00/100** (\$100,000.00) shall be due and payable to Escrow Agent (as defined below) under the provisions of Paragraph 22 upon execution of this Agreement by Seller (after School Board approval);

B. The balance shall be due and payable in cash at Closing (as adjusted by prorations and payment of expenses as herein provided).

3. **INVESTIGATION PERIOD.** Buyer shall have at reasonable times until one hundred twenty (120) days following the Effective Date to perform due diligence on, investigate and inspect any aspect of the Property, to determine whether or not the same is satisfactory to Buyer ("Investigation Period"). During such Investigation Period, Buyer will be provided access to the Property to inspect the Property,

verify zoning, conduct engineering and environmental studies, feasibility tests, determine use under zoning or the proposed comprehensive land use plan, test for hazardous materials, and to determine the availability of water, sewer, and other utilities. Buyer hereby agrees to defend, indemnify and hold Seller harmless against any claims costs, damages, or liability arising out of Buyer's investigation of the Property, including costs and reasonable attorney's fees at both trial and appellate levels. Buyer hereby agrees to defend, indemnify and hold Seller harmless from and against all liens on the Property filed by contractors, materialmen, or laborers performing work and tests for Buyer. If Buyer fails to close for any reason, all materials provided by Seller to Buyer and all materials relating to the Property obtained by Buyer and all copies of any such materials will be immediately delivered to Seller. Buyer may, in its sole discretion during the Investigation Period, by written notice to Seller, terminate this Agreement and receive a refund of Buyer's deposit.

4. **SURVEY**. Seller, at Seller's expense, will have the Property surveyed and certified by a registered Florida surveyor in accordance with Chapter 61G17-6 of the Florida Administrative Code. The survey shall be completed no later than thirty (30) days after the Effective Date, and subsequently provided to Buyer by Seller within five (5) days of receipt by the Seller. If the Property is surveyed and the survey map does not reveal any encroachments or other title defects, the survey exception will be removed from the owner's title insurance policy.

5. **QUALITY OF TITLE**. Buyer shall not be obligated hereunder unless title to the Property shall be marketable of record as will enable Emmanuel, Sheppard and Condon, P.A. as agent for an ALTA member title insurance underwriter approved by Buyer, and authorized to do business in Florida, to issue to Buyer, at regular rates, its full sales price coverage, standard marketability revised ALTA Owner's Title Insurance Policy, in the amount of the Sales Price hereunder, without exception as to survey (if one obtained) or mechanic's or similar liens, and free and clear of all other liens and encumbrances and subject only to: A. General and special real property ad valorem taxes; B. restrictions, easements and mineral reservations of record; C. reservation of mineral rights as required by Florida Statutes; or D. other matters as may be approved in writing by Buyer or title objections waived by Buyer pursuant to this Paragraph.

An Owner's Title Commitment, together with copies of all exceptions, shall be provided by Seller to Buyer within twenty (20) days after the Seller receives the Survey. If the title evidence (or survey obtained by Buyer pursuant to Section 4) reveals any defects in the title or any physical encroachment (or other survey issue) on the Property, the Buyer shall have ten (10) business days from the date the Buyer receives the title evidence or survey to notify the Seller in writing of the defects. If within sixty (60) days from the receipt of Buyer's written notice of defects, the Seller is unwilling or unable to cure the defects to the reasonable satisfaction of Buyer, the Buyer may, at its option, by written notice to Seller given within the ensuing ten (10) business days, either (1) cancel and terminate this Agreement and in such event, the Seller will return any deposit to Buyer and neither party shall have any further obligations under this Agreement; or (2) the Buyer may elect to purchase the Property in its "AS IS" condition without offset against the Sales Price for any title defects. Seller shall have no affirmative obligation to cure or attempt to cure any defects of title or survey. If the Buyer elects to purchase the Property, title will be conveyed on the later of the Closing Date or ten (10) days after the election of Buyer. Standard exceptions contained in the commitment relating to parties in possession and mechanics liens will be removed from the policy in accordance with Florida law upon receipt of the required affidavits. The survey exception will be removed (or modified to reflect the state of facts evidenced by the survey) if Buyer obtains a satisfactory current survey as provided in Section 4.

6. **COVENANTS AND CONDITIONS OF SETTLEMENT**. On the day of Closing, Seller shall execute and deliver a Special Warranty Deed to Buyer as shall be required to convey title to the

Property in accordance with this Agreement and Seller's Affidavit of Possession and No Liens. The Special Warranty Deed shall be in form and substance reasonably satisfactory to the Seller and the Buyer and in proper form for recording. Seller and Buyer shall execute closing statements and such other documents as may be reasonably required to complete closing and accomplish transfer of the Property to Buyer hereunder.

7. **CLOSING AND CLOSING DATE.** The closing of this sale and purchase by Seller and Buyer (the "Closing") shall be held on or before forty five (45) days after the Investigation Period, at a time and place mutually agreeable to the parties, but if none is agreed to, at the offices of Emmanuel, Sheppard and Condon, P.A., 30 South Spring St., Pensacola, Florida 32502.

8. **APPORTIONMENTS.** All ad valorem taxes and assessments relating to the Property shall be prorated between Seller and Buyer as of midnight immediately preceding the Closing Date. The ad valorem tax proration shall be based upon the fully documented amount based on the current year's assessment. If the current year's assessment is not available, taxes will be prorated on the prior year's assessment and either party shall have the right to the request and obtain a proration or receipt of the appropriate tax bill. **(Note to closing agent: as a governmental entity, Seller does not pay ad valorem real property taxes. Care should be taken to determine the ad valorem tax liability for the year of Closing).**

9. **CLOSING COSTS.** Seller shall pay for the cost of preparing and recording the deed, for any costs necessary to cure title and/or survey matters (pursuant to Section 5, herein), and for Seller's attorney's fees and for the documentary stamps on the deed required by applicable Florida law. Buyer shall also pay for any financing costs of Buyer incurred to purchase the Property including, but not limited to, any intangible tax and documentary stamps on the note and mortgage, and Buyer's attorney's fees, and for the owner's title insurance policy in the amount of the Purchase Price. Seller shall pay for the cost of the Survey.

10. **BROKERAGE.** Seller and Buyer warrant each to the other (and it is agreed that this warranty shall survive delivery of the deed) that no broker or agent has been employed with respect to the sale of the Property other than Scoggins III, Inc. who represents the Seller. Scoggins III, Inc. shall be compensated by Seller according to terms of an outside agreement between Scoggins III, Inc., and Seller. Each party agrees to indemnify and hold harmless the other from any claim made by any other brokers or agents who claim to act for the party sought to be charged for a commission, compensation, brokerage fees, or similar payments in connection with this transaction and against any and all expense or liability arising out of any such claim.

11. **DEFAULT.**

A. *Notice of Default.* No default as to any provision of this Agreement shall be claimed or charged by either party against the other until notice of such default has been given to the defaulting party, and such default remains uncured for a period of ten (10) days after such notice. Notwithstanding the foregoing, the Closing Date shall not be changed, delayed, postponed, or extended by any requirement for notice of default, if such default consists of failure to appear at the Closing.

B. *Default by Buyer.* If the conditions precedent to Buyer's obligations to perform under this Agreement have been fulfilled within the time periods required under this Agreement, or if Buyer does not diligently and in good faith pursue the satisfaction of such conditions precedent, and Buyer thereafter fails to perform any of the covenants of this Agreement applicable to Buyer, Seller may retain the portion of the Deposit actually paid by Buyer for the account of Seller as liquidated and agreed

upon damages as consideration for the execution of this Agreement and in full settlement of any claims for damages, and Seller and Buyer shall be relieved of all further obligations and liability under this Agreement, except as otherwise specifically provided in other parts of this Agreement. Alternatively, Seller shall have the right to proceed against Buyer in law or equity, including but not limited to claims for monetary damages and/or the right of specific performance.

C. *Default by Seller.* If Seller fails to perform any of the covenants of this Agreement applicable to Seller, except the inability of Seller to cure title defects as provided in the paragraph of this Agreement entitled "Quality of Title," the Deposit shall be returned to Buyer, and Seller and Buyer shall be relieved of all further obligations and liability under this Agreement, except as otherwise specifically provided in other parts of this Agreement.

12. **NOTICES.** All notices, demands, requests, and other communications hereunder shall be in writing and shall be deemed to have been given if delivered personally, or sent by registered or certified mail, return receipt requested, postage pre-paid, or by another recognized overnight delivery service (e.g., Federal Express) as follows:

If to Seller:                   The School Board of Escambia County, Florida  
ATTENTION: Mr. Shawn Dennis  
75 North Pace Blvd.  
Pensacola, Florida 32505

With Copy to:               Emmanuel, Sheppard and Condon, P.A.  
ATTENTION: Geoff Brodersen  
30 S. Spring St.  
Pensacola, Florida 32502

If to Buyer:                   AMR AT PENSACOLA, INC.  
730 Bayfront Parkway, Suite 4A  
Pensacola, FL 32502

With Copy to:               Scoggins III, Inc.  
ATTENTION: Danny Zimmern  
124 B – Wright Street  
Pensacola, Florida 32502

or at such other address as the party may specify from time to time by written notice to the other party.

13. **SUCCESSORS AND ASSIGNS.** All terms of this Sales Agreement shall be binding upon and shall inure to the benefit of and be enforceable by the parties hereto and their respective legal representatives, heirs, successors and assigns. This Agreement may not be assigned without the written consent of Seller.

14. **GOVERNING LAW.** This Agreement is intended to be performed in the State of Florida and shall be governed and construed in all respects in accordance with the laws of the State of Florida. Venue in any action arising under this Agreement shall lie in the Circuit Court in the county where the Property is located.



15. **CAPTIONS**. The captions of this Agreement are inserted for convenience or reference only and not to define, describe or limit the scope or the intent of this Agreement or any term hereof.

16. **COUNTERPARTS**. This Agreement may be executed in any number of counterparts, each of which shall be deemed to be an original but all of which together shall constitute one and the same instrument.

17. **CHANGES AND MODIFICATIONS; CHANGES AND INCORPORATIONS OF PRIOR AGREEMENTS**. This Agreement may not be orally changed, modified or terminated; it supersedes any and all prior understandings and/or letter agreements; other matters of similar nature shall be deemed to be of no force or effect in the interpretation of this Agreement, it being intended that this Agreement represents the entire understanding of the parties. No modification or waiver of any provision hereof shall be valid unless in writing and signed by a party against whom it is to be enforced.

18. **WAIVER**. No failure of either party to exercise any power given hereunder or to insist upon strict compliance with any obligations specified herein, and no custom or practice at variance with the terms hereof, shall constitute a waiver of any party's right to demand strict compliance with the terms hereof; provided, however, that any party may, at its sole option, waive any requirement, covenant or condition herein established for the benefit of such party without affecting any of the other provisions of this Agreement.

19. **FURTHER ASSURANCES**. Seller and Buyer each agree to execute and deliver to the other such further documents and instruments as may be reasonable and necessary in furtherance of and to effectuate the intent of the parties as expressed by the terms and conditions hereof.

20. **ATTORNEY'S FEES**. If either party commences an action against the other to enforce any of the terms hereof or because of the breach by either party of any of the covenants, terms or conditions hereof, the prevailing party shall be entitled to costs, expenses, and reasonable attorney's fees at both trial and appellate levels, incurred in connection with the bringing and/or defense of any such action.

21. **RISK OF LOSS**. Until the purchase of the Property has been consummated on the date of Closing, all risk of, or damage of, or destruction of, the Property, whether by fire, flood, tornado, hurricane or other casualty, or by the exercise of the power of eminent domain, or otherwise, shall belong to and be borne by the Seller. If, prior to Closing, the Property or any part thereof shall be damaged or destroyed, Buyer, at Buyer's option, may declare this Agreement null and void and receive a full refund of the Deposit, plus interest. If Buyer elects to proceed and to consummate the transfer and conveyance under this Agreement despite such damage or destruction, there shall be no reduction in, abatement of, or set-off against the Sales Price, and Seller shall assign to Buyer all of Seller's right, title and interest in and to all insurance proceeds resulting from such damage or destruction.

22. **ESCROW AGENT**. Seller and Buyer appoint Emmanuel, Sheppard and Condon, P.A. to serve as escrow agent hereunder ("Escrow Agent"). The Escrow Agent receiving funds agrees to promptly deposit them in a non-interest bearing escrow account, to hold them in escrow, and disburse them in accordance with this Agreement. No funds shall be returned to the Buyer during the Investigation Period, if any, until the Buyer furnishes proof satisfactory to the Escrow Agent that all costs incurred in connection with the investigation have been fully paid. The funds will be released only (1) at Closing; or (2) upon written direction from both parties; or (3) to the Buyer at Seller's written direction; or (4) to the Seller five (5) days after receipt of written direction from the Seller stating that the Buyer is in default under the terms of the Agreement, in which event the Escrow Agent shall promptly furnish a copy of the directions to Buyer



and if there is no written objection thereto within five (5) days, the Escrow Agent shall remit the Deposit to Seller. If a written objection is filed within the time allowed or if the Escrow Agent is in doubt as to its duties, the Escrow Agent may continue to hold the funds in escrow until the matter is resolved either by joint written direction from the parties or by order of the Circuit Court having jurisdiction of the dispute, or the Escrow Agent may interplead the same in the Circuit Court. In any such action or proceeding, the Escrow Agent shall be entitled to recover its reasonable costs and attorney's fees.

A. All deposits paid pursuant to this Agreement prior to the Closing shall be held in escrow by Emmanuel, Sheppard and Condon, P.A. in a non-interest-bearing trust account subject to the terms of the Agreement and shall be duly accounted for at the Closing.

B. The Escrow Agent shall be subject to the following terms and conditions and no others:

i. The duties and obligations of the Escrow Agent shall be determined solely by the express provisions of this Agreement and no implied duties or obligations shall be read into this Agreement against the Escrow Agent. Further, the Escrow Agent shall be under no obligation to refer to any other documents between or among Buyer and Seller related in any way to this Agreement.

ii. The Escrow Agent shall not be liable to anyone by reason of any error of judgment, or for any act done or step taken or omitted by the Escrow Agent in good faith, or for any mistake of fact or law, or for anything which the Escrow Agent may do or refrain from doing in connection herewith, unless caused by or arising out of the actual and intentional misconduct of the Escrow Agent or any act of the Escrow Agent in willful disregard of this Agreement or involving gross negligence on the part of the Escrow Agent.

iii. The Escrow Agent shall be entitled to rely upon, and shall not be subject to any liability in acting in reliance upon, any writing furnished to the Escrow Agent by either Buyer or Seller, and shall be entitled to treat as genuine and as the document it purports to be, any letter, paper, or other document furnished to the Escrow Agent in connection with this Agreement. The Escrow Agent may rely on any affidavit of either Buyer or Seller or any other person as to the existence of any facts stated therein to be known by the affiant.

iv. In the event of any disagreement between the Buyer and Seller resulting in adverse claims and demands being made in connection with or against the funds held in escrow, the Escrow Agent shall be entitled, at the Escrow Agent's option, to refuse to comply with the claims or demands of either party until such disagreement is finally resolved (a) by a court of competent jurisdiction (in proceedings which the Escrow Agent or any other party may initiate, it being understood and agreed by the Buyer and Seller that the Escrow Agent has authority (but no obligation) to initiate such proceedings); or (b) by an arbitrator in the event that Buyer and Seller determine to submit the dispute to arbitration pursuant to the applicable rules of the American Arbitration Association, and in so doing the Escrow Agent shall not be or become liable to any party.

v. Buyer and Seller each agree to indemnify the Escrow Agent against any and all losses, liabilities, costs (including reasonable legal fees) and other expenses in any way incurred by the Escrow Agent in connection with or as a result of any disagreement between Buyer and Seller under this Agreement or otherwise incurred by the Escrow Agent in any way on account of their role as escrow agent, except that neither Buyer nor Seller shall have any obligation to pay the Escrow Agent any fee for escrow services hereunder.

C. Buyer and Seller acknowledge that the Escrow Agent is counsel to Seller and agree that the Escrow Agent may continue to act as Seller's counsel notwithstanding any dispute or litigation arising with respect to the deposit or Escrow Agent's duties.

23. **TIME OF ESSENCE. TIME IS OF THE ESSENCE IN THIS AGREEMENT.**

24. **RADON.** Radon is a naturally occurring radioactive gas that, when it has accumulated in a building in sufficient quantities, may present health risks to persons who are exposed to it over time. Levels of radon that exceed federal and state guidelines have been found in buildings in Florida. Additional information regarding radon and radon testing may be obtained from your county public health unit. This disclosure is required by Florida law to be contained in all contracts for sale or lease of buildings.

25. **APPROVAL CONTINGENCY.** Buyer has been advised and understands that all sales of real property by Seller must be approved by the School Board (the "Board") after proper notice, presentation and consideration. This offer to purchase, as executed by Buyer, shall be presented to the Board within sixty (60) days of the date of Buyer's signature, during which period this offer shall be irrevocable and may not be withdrawn by Buyer. If the Board accepts this offer within sixty (60) days from the date hereof, this offer and Seller's acceptance shall become a legally binding contract fully enforceable by either party hereto. If the Board fails to accept this offer within sixty (60) days from the date hereof, this offer shall be automatically withdrawn and from thenceforth shall be null and void.

26. **RECORDING.** Neither this Agreement nor any portion thereof, nor any memorandum relating hereto shall be placed of record by any party to this Agreement.

27. **WAIVER OF JURY TRIAL.** SELLER AND BUYER HEREBY KNOWINGLY, VOLUNTARILY AND INTENTIONALLY, WAIVE THE RIGHT EITHER MAY HAVE TO A TRIAL BY JURY IN RESPECT OF ANY LITIGATION BASED HEREON OR ARISING OUT OF, UNDER, OR IN CONNECTION WITH THIS AGREEMENT AND ANY AGREEMENT CONTEMPLATED TO BE EXECUTED IN CONNECTION HEREWITH, OR ANY COURSE OF CONDUCT, COURSE OF DEALING, STATEMENTS (WHETHER VERBAL OR WRITTEN) OR ACTION OF EITHER PARTY. THIS PROVISION IS A MATERIAL INDUCEMENT FOR THE SELLER AND BUYER ENTERING INTO THIS AGREEMENT.

**IN WITNESS WHEREOF**, the Buyer and Seller have executed this Agreement as of the Effective Date.

BALANCE OF PAGE INTENTIONALLY LEFT BLANK

[SIGNATURE PAGES FOLLOW]

Signed, Sealed and Delivered  
in the Presence of:

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_  
(Names should be typed or printed below signatures)

**SELLER:**

**The School Board of Escambia County, Florida**

DocuSigned by:  
*Patricia Hightower*  
By: \_\_\_\_\_  
59EC5F21147D400...  
Patricia Hightower, Board Chair

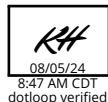
Date: 8/21/2024 | 11:16 AM CDT  
\_\_\_\_\_

**ATTEST:**

DocuSigned by:  
*Keith Leonard*  
\_\_\_\_\_  
49386E2EC066436...  
Keith Leonard, Superintendent

Date: 8/21/2024 | 12:41 PM CDT  
\_\_\_\_\_


DS  
APPROVED  
ESCAMBIA COUNTY SCHOOL BOARD  
**AUG 20 2024**  
VERIFIED BY RECORDING SECRETARY



**BUYER:**

AMR AT PENSACOLA, INC.,  
a Florida not for profit corporation

1. \_\_\_\_\_

By:  dotloop verified  
08/05/24 8:47 AM CDT  
DSWV-72ED-4BDS-BTK2

Its: President

2. \_\_\_\_\_

Date: 08/05/2024

\_\_\_\_\_  
(Names should be typed or printed below signatures)



# EXHIBIT "A"

## LEGAL DESCRIPTION

To be determined by survey.

Parcel ID: 172S305009000005 and 172S305009000021

As depicted on the Property Appraiser's tax map as follows, the subject properties outlined in red:




[BACK TO SEARCH](#)


dotloop verification certificate for:  
**Sales Agreement - 1403 W. St. Joseph Avenue**


Transaction ID: 62866039 - Document ID: 1211894948 - Document Pages: 10 - Signatures: 11 - Verification Code: 5qG4-CTgb-0Px3


[VIEW DOCUMENT](#)


[PRINT](#)

 08/05/24 8:47 AM CDT dotloop verified	KH Date/Time: 08/05/24 8:47 AM CDT ID: 45892972690 IP Address: 99.186.250.168 Security Level: <b>Email Verified</b> ESIGN Consumer Consent Disclosures: <b>Accepted</b> - <a href="#">VIEW AGREEMENT</a>
--	---

 08/05/24 8:47 AM CDT dotloop verified	KH Date/Time: 08/05/24 8:47 AM CDT ID: 45892972691 IP Address: 99.186.250.168 Security Level: <b>Email Verified</b> ESIGN Consumer Consent Disclosures: <b>Accepted</b> - <a href="#">VIEW AGREEMENT</a>
--	---

 08/05/24 8:47 AM CDT dotloop verified	KH Date/Time: 08/05/24 8:47 AM CDT ID: 45892972692 IP Address: 99.186.250.168 Security Level: <b>Email Verified</b> ESIGN Consumer Consent Disclosures: <b>Accepted</b> - <a href="#">VIEW AGREEMENT</a>
--	---

 08/05/24 8:47 AM CDT dotloop verified	KH Date/Time: 08/05/24 8:47 AM CDT ID: 45892972693 IP Address: 99.186.250.168 Security Level: <b>Email Verified</b> ESIGN Consumer Consent Disclosures: <b>Accepted</b> - <a href="#">VIEW AGREEMENT</a>
--	---

 08/05/24 8:47 AM CDT dotloop verified	KH Date/Time: 08/05/24 8:47 AM CDT ID: 45892972694 IP Address: 99.186.250.168 Security Level: <b>Email Verified</b> ESIGN Consumer Consent Disclosures: <b>Accepted</b> - <a href="#">VIEW AGREEMENT</a>
--	---

KH Date/Time: 08/05/24 8:47 AM CDT ID: 45892972695 IP Address: 99.186.250.168
--

dotloop - peoplework, not paperwork.

Security Level: Email Verified

ESIGN Consumer Consent Disclosures: Accepted - [VIEW AGREEMENT](#)

*KH*

08/05/24 8:47  
AM CDT  
dotloop verified

KH

Date/Time: 08/05/24 8:47 AM CDT

ID: 45892972696

IP Address: 99.186.250.168

Security Level: Email Verified

ESIGN Consumer Consent Disclosures:

*KH*

08/05/24 8:47  
AM CDT  
dotloop verified

Accepted - [VIEW AGREEMENT](#)

*KH*

08/05/24 8:47  
AM CDT  
dotloop verified

KH

Date/Time: 08/05/24 8:47 AM CDT

ID: 45892972697

IP Address: 99.186.250.168

Security Level: Email Verified

ESIGN Consumer Consent Disclosures: Accepted - [VIEW AGREEMENT](#)

*Kevin Hagen*

dotloop verified  
08/05/24 8:47 AM CDT  
DSVW-72ED-4BDS-BTK2

Kevin Hagen

Date/Time: 08/05/24 8:47 AM CDT

ID: 45892972698

IP Address: 99.186.250.168

Security Level: Email Verified

ESIGN Consumer Consent Disclosures: Accepted - [VIEW AGREEMENT](#)

*KH*

08/05/24 8:47  
AM CDT  
dotloop verified

KH

Date/Time: 08/05/24 8:47 AM CDT

ID: 45892972701

IP Address: 99.186.250.168

Security Level: Email Verified

ESIGN Consumer Consent Disclosures: Accepted - [VIEW AGREEMENT](#)

*KH*

08/05/24 8:47  
AM CDT  
dotloop verified

KH

Date/Time: 08/05/24 8:47 AM CDT

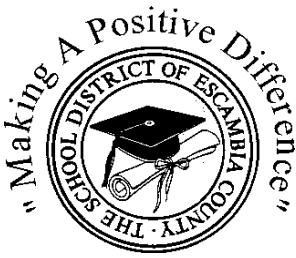
ID: 45892972702

IP Address: 99.186.250.168

Security Level: Email Verified

ESIGN Consumer Consent Disclosures: Accepted - [VIEW AGREEMENT](#)





# DOCUSIGN REVIEW FORM FOR SCHOOL BOARD AGREEMENTS OPERATIONS

**DOCUMENT TITLE:** August 2024 Sales Agreement with AMR for 1403 W. St. Joseph (McMillan)

**SCHOOL BOARD MEETING DATE:** August 20, 2024

---

**REVIEWER INITIALS:**

**Coordinator of Board Affairs:** DS  
EB \_\_\_\_\_

**Executive Assistant to the Superintendent:** DS  
Dh \_\_\_\_\_



**1 EXISTING PLAN**  
 SCALE: 1" = 30'-0" DRAWING REF: A-4.0

# McMillan School Adaptive Reuse

1403 W St Joseph Ave, Pensacola, FL 32501

No.	Description	Date

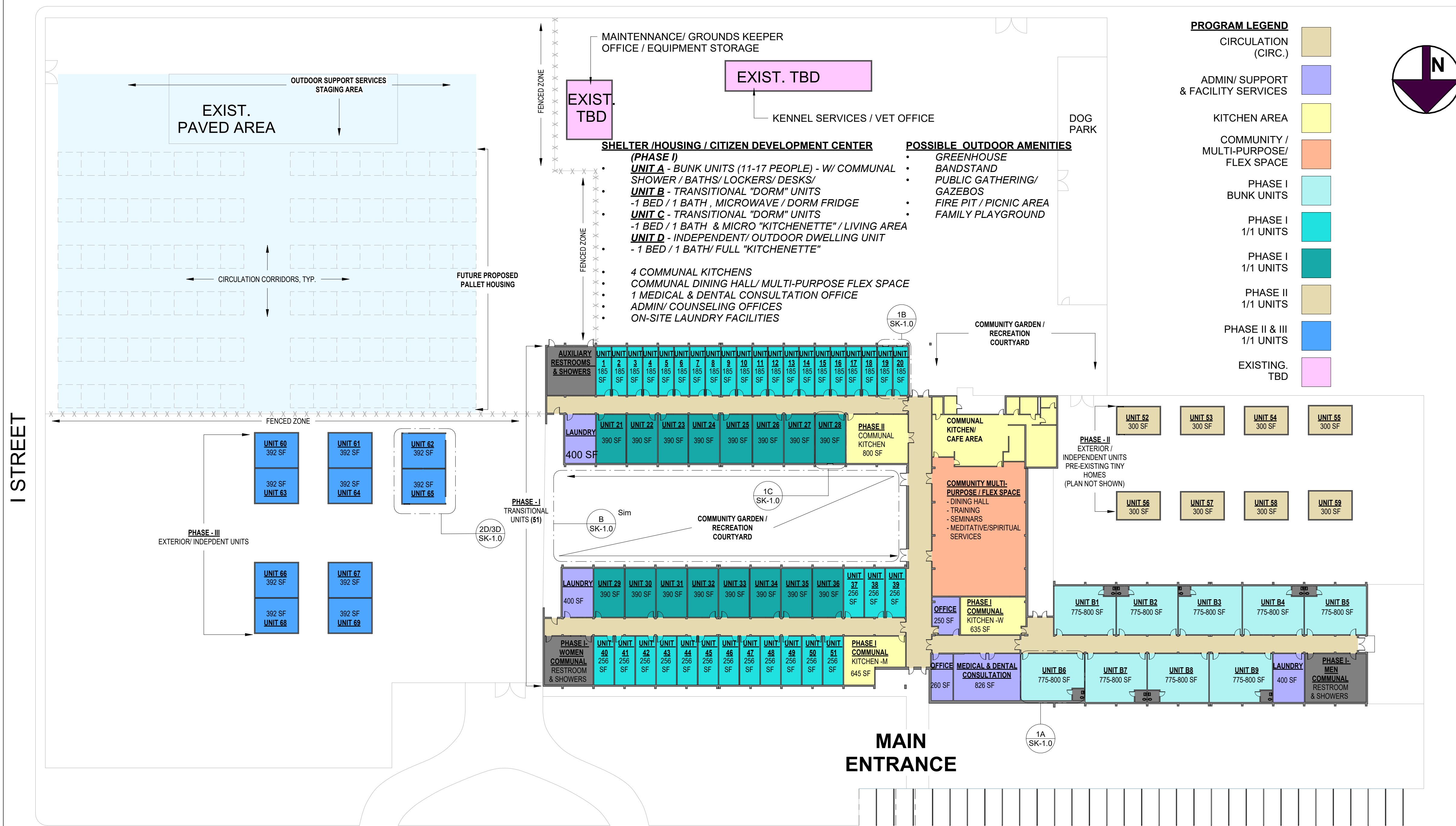
## EXISTING CONDITIONS

Date	12/19/2024
Drawn By	Author
Checked By	Checker

**SK-0.9**

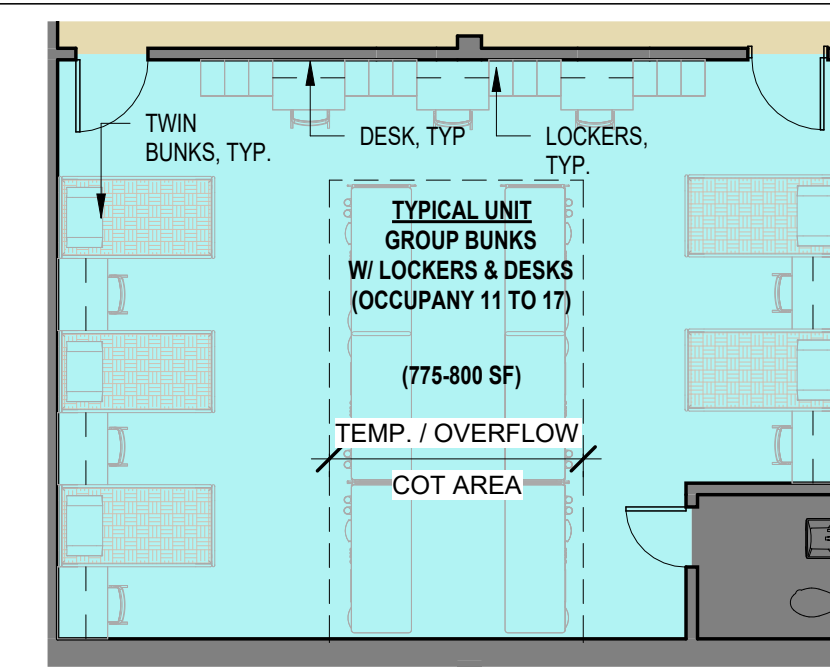
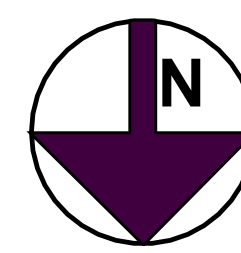


SCOTT STREET

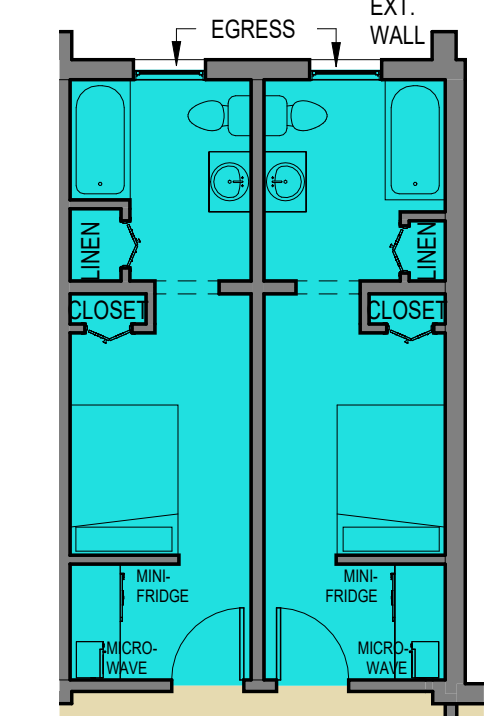


PROGRAM LEGEND

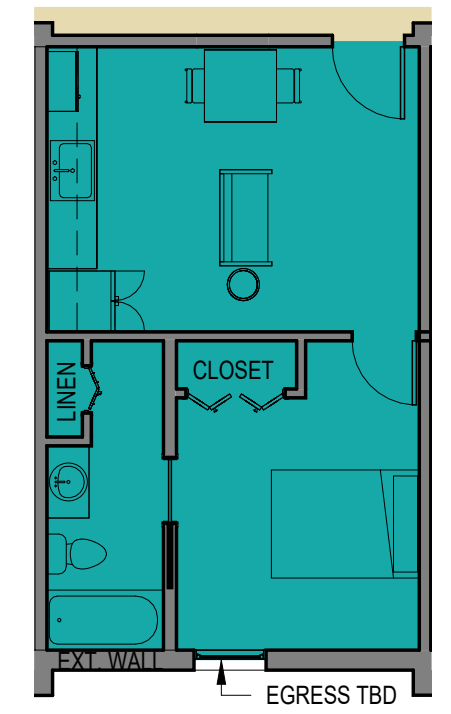
- CIRCULATION (CIRC.)
- ADMIN/ SUPPORT & FACILITY SERVICES
- KITCHEN AREA
- COMMUNITY / MULTI-PURPOSE/ FLEX SPACE
- PHASE I BUNK UNITS
- PHASE I 1/1 UNITS
- PHASE I 1/1 UNITS
- PHASE II 1/1 UNITS
- PHASE II & III 1/1 UNITS
- EXISTING. TBD



1A PHASE I - UNIT "B" - BUNKS  
SCALE: 1/8" = 1'-0"

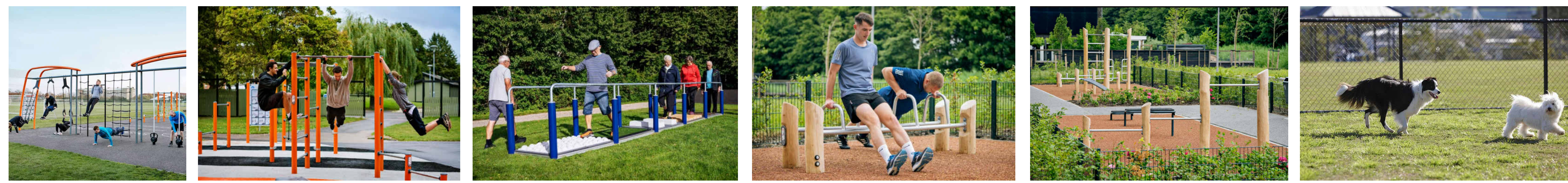


1B PHASE 1 - UNIT "A" - 1/1  
SCALE: 1/8" = 1'-0"



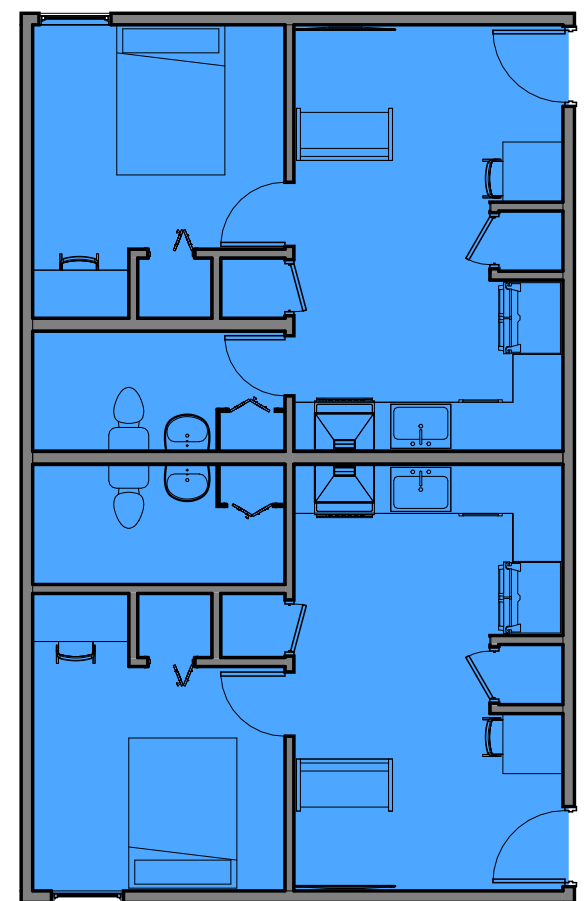
1C PHASE I - UNIT "C" - 1/1  
SCALE: 1/8" = 1'-0"

A PROPOSED HOUSING DEVELOPMENT CENTER  
SCALE: 1" = 30'-0"



B COMMUNITY GARDEN/ FITNESS YARD (DESIGN TBD)  
SCALE: 1/8" = 1'-0"

2D/3D PHASE II & III - UNIT "D" - 2/2  
SCALE: 1/8" = 1'-0"



No.	Description	Date

CONCEPTUAL PROGRAMMING SCHEME

Date	12/19/2024
Drawn By	Author
Checked By	Checker

SK-1.0

GENERAL NOTES:  
 SURVEY AS BUILT CONDITIONS/DIMENSIONS NEEDS TO BE CONFIRMED BEFORE PROCEEDING WITH ADDITIONAL CONCEPTUAL DESIGNING / PROGRAMMING  
 PARKING/ CIRCULATION ANALYSIS NEEDED AFTER DESIGN PROGRAM IS ESTABLISHED.  
 M.E.P. RETROFIT REQUIREMENTS TBD.  
 CONSIDERATIONS:  
 • MINISPLIT SYSTEM FOR RESIDENTIAL UNITS  
 • UTILIZE EXISTING HVAC FOR COMMON AREAS  
 LIFE SAFETY / CODE ANALYSIS NEEDED AFTER DESIGN PROGRAM IS ESTABLISHED

1403 W St Joseph Ave, Pensacola, FL 32501

McMillan School Adaptive Reuse



**AMR AT PENSACOLA, INC.**  
AUDITED FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2023 AND 2022  
DURST JORDAN, CPA, PA

## TABLE OF CONTENTS

	PAGE
Independent Auditor's Report	1
<b>Financial Statements:</b>	
Statements of Financial Position	3
Statements of Activities and Changes in Net Assets	4
Statement of Functional Expenses - 2023	5
Statement of Functional Expenses - 2022	6
Statements of Cash Flows	7
Notes to the Financial Statements	8
<b>Supplementary Information:</b>	
Statements of Financial Position, Activities and Changes in Net Assets, and Cash Flows by Property	18



4459-B Hwy. 90  
Pace, Florida 32571  
Phone: (850) 995-5000  
Fax: (850) 994-4522

## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of  
AMR at Pensacola, Inc.

### Opinion

We have audited the accompanying financial statements of AMR at Pensacola, Inc. (a nonprofit organization), which comprise the statements of financial position as of as of June 30, 2023 and 2022, and the related statements of activities and changes in net assets, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of AMR at Pensacola, Inc. as of June 30, 2023 and 2022, and the changes in its net assets, functional expenses, and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of AMR at Pensacola, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about AMR at Pensacola, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional

omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

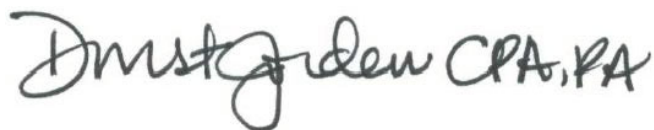
In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of AMR at Pensacola, Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about AMR at Pensacola, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

### **Supplementary Information**

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The "Statements of Financial Position, Activities and Changes in Net Assets, and Cash Flows by Property" are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.



Pace, FL  
September 22, 2023



**AMR at Pensacola, Inc.**  
**Statements of Financial Position**  
As of June 30, 2023 and 2022

<b>ASSETS</b>		
	<b>2023</b>	<b>2022</b>
<b>Current Assets</b>		
Cash - restricted	\$ 52,772	\$ 50,699
Cash - unrestricted	383,692	156,531
Total cash	<u>436,464</u>	<u>207,230</u>
Certificates of deposit	240,118	236,526
Investments	81,913	-
Accounts receivable	107,504	86,369
Prepaid expenses	90,383	88,782
Security deposits receivable	101,314	89,781
Total current assets	<u>1,057,696</u>	<u>708,688</u>
<b>Non-Current Assets</b>		
Property and equipment, net of accumulated depreciation of \$2,681,985 and \$2,583,944	3,036,735	2,810,674
Amortizable project costs, net of accumulated amortization of \$265,969 and \$255,278	54,758	65,449
Construction in progress	397,165	10,380
Utility deposits	2	2
Total non-current assets	<u>3,488,660</u>	<u>2,886,505</u>
<b>Total Assets</b>	<u>\$ 4,546,356</u>	<u>\$ 3,595,193</u>
<b>LIABILITIES &amp; NET ASSETS</b>		
<b>Current Liabilities</b>		
Accounts payable	\$ 15,848	\$ 44,063
Salaries and wages payable	8,776	7,369
Security deposits	102,744	91,211
Current portion of long-term debt	164,361	214,685
Total current liabilities	<u>291,729</u>	<u>357,328</u>
<b>Long-Term Liabilities</b>		
Long-term debt, net of imputed interest discount of \$239,681 and debt issuance costs of \$34,029 (less current portion)	1,508,509	1,160,219
Total long-term liabilities	<u>1,508,509</u>	<u>1,160,219</u>
<b>Total Liabilities</b>	1,800,238	1,517,547
<b>Net Assets</b>		
Net assets without donor restrictions	2,513,618	2,077,646
Net assets with donor restrictions	232,500	-
Total net assets	<u>2,746,118</u>	<u>2,077,646</u>
<b>Total Liabilities and Net Assets</b>	<u>\$ 4,546,356</u>	<u>\$ 3,595,193</u>

The accompanying notes are an integral part of these financial statements.

**AMR at Pensacola, Inc.**  
**Statements of Activities and Changes in Net Assets**  
For the years ended June 30, 2023 and 2022

	<b>2023</b>	<b>2022</b>
<b>Revenue</b>		
Dwelling rental revenue	\$ 1,261,510	\$ 1,152,111
Public support	232,500	1,000
Grants	155,445	-
Mortgage forgiveness income	18,375	29,284
Net investment return	(412)	-
Interest income	5,410	951
(Loss) gain on sale of assets	(1,480)	166,158
Insurance proceeds	6,578	43
Other income	4,920	11,358
Total revenue	1,682,846	1,360,905
<b>Expenses</b>		
Program services	781,143	907,241
General and administrative	233,231	222,296
Total expenses	1,014,374	1,129,537
<b>Change in Net Assets</b>	668,472	231,368
<b>Net Assets - Beginning of Year</b>	2,077,646	1,846,278
<b>Net Assets - End of Year</b>	\$ 2,746,118	\$ 2,077,646

The accompanying notes are an integral part of these financial statements.

**AMR at Pensacola, Inc.**  
Statement of Functional Expenses  
For the year ended June 30, 2023

	<b>Program Services</b>	<b>General and Administrative</b>	<b>Total</b>
Administration fees	\$ 4,756	\$ -	\$ 4,756
Depreciation and amortization	153,378	4,366	157,744
Donations	-	2,550	2,550
Dues and subscriptions	-	5,492	5,492
Facilities rental	-	26,325	26,325
Fuel	40	3,248	3,288
Honorariums	-	5,000	5,000
Insurance	119,489	12,671	132,160
Interest expense	60,825	-	60,825
Management and compliance fees	102,739	-	102,739
Meals and entertainment	-	3,357	3,357
Miscellaneous expense	-	6,293	6,293
Office supplies	-	10,784	10,784
Payroll expenses	117,024	95,747	212,771
Professional fees	-	33,579	33,579
Repairs and maintenance	172,543	8,344	180,887
Taxes and licenses	14,256	116	14,372
Travel expense	-	1,241	1,241
Utilities	36,093	14,118	50,211
<b>Total</b>	<b>\$ 781,143</b>	<b>\$ 233,231</b>	<b>\$ 1,014,374</b>

The accompanying notes are an integral part of these financial statements.

**AMR at Pensacola, Inc.**  
Statement of Functional Expenses  
For the year ended June 30, 2022

	<b>Program Services</b>	<b>General and Administrative</b>	<b>Total</b>
Administration fees	\$ -	\$ 2,494	\$ 2,494
Depreciation and amortization	143,424	4,809	148,233
Donations	-	3,500	3,500
Dues and subscriptions	-	2,225	2,225
Facilities rental	-	25,426	25,426
Fuel	2,988	-	2,988
Honorariums	-	5,000	5,000
Insurance	132,062	16,850	148,912
Interest expense	58,068	-	58,068
Management and compliance fees	98,483	-	98,483
Meals and entertainment	-	2,220	2,220
Miscellaneous expense	-	5,755	5,755
Office supplies	-	8,234	8,234
Payroll expenses	109,922	89,937	199,859
Professional fees	-	35,839	35,839
Repairs and maintenance	302,523	10,060	312,583
Taxes and licenses	16,528	1,199	17,727
Travel expense	-	1,576	1,576
Utilities	43,243	7,172	50,415
<b>Total</b>	<b>\$ 907,241</b>	<b>\$ 222,296</b>	<b>\$ 1,129,537</b>

The accompanying notes are an integral part of these financial statements.

**AMR at Pensacola, Inc.**  
**Statements of Cash Flows**  
For the years ended June 30, 2023 and 2022

	<b>2023</b>	<b>2022</b>
<b>Cash Flows from Operating Activities</b>		
Change in net assets	\$ 668,472	\$ 231,368
Adjustments to reconcile change in net assets to net cash from operating activities:		
Amortization of debt issuance costs	4,651	1,945
Depreciation and amortization	157,744	148,233
Discount amortization	23,648	24,653
Loss (gain) on sale of assets	1,480	(166,158)
Mortgage forgiveness	(18,375)	(29,284)
Changes in operating assets and liabilities:		
Certificate of deposit	(3,592)	(885)
Accounts receivable	(21,135)	(62,267)
Prepaid expenses	(1,601)	23,424
Security deposits receivable	(11,533)	(2,311)
Accounts payable	(28,215)	32,002
Salaries and wages payable	1,407	(2,064)
Security deposits	11,533	2,811
Net cash from operating activities	784,484	201,467
 <b>Cash Flows from Investing Activities</b>		
Investment purchases	(81,913)	-
Proceeds from sale of assets	-	125,409
Project costs	(386,785)	(49,814)
Acquisition of property & equipment	(374,594)	(230,337)
Net cash from investing activities	(843,292)	(154,742)
 <b>Cash Flows from Financing Activities</b>		
Debt proceeds	420,530	-
Debt issuance costs	(18,941)	-
Principal payments on debt	(113,547)	(96,256)
Net cash from financing activities	288,042	(96,256)
 <b>Net Change in Cash</b>	229,234	(49,531)
<b>Cash - Beginning of Year</b>	207,230	256,761
<b>Cash - End of Year</b>	\$ 436,464	\$ 207,230

The accompanying notes are an integral part of these financial statements.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2023 and 2022

**NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

A. Organization and Purpose

AMR at Pensacola, Inc. was formed on February 16, 1989 as a Florida corporation for the purpose of constructing and operating low-income rental housing units located in Escambia and Santa Rosa Counties, Florida. The major source of revenue is dwelling rental income, but the Organization also receives grants and public support.

B. Basis of Accounting and Presentation

The accompanying financial statements of the Organization have been prepared on the accrual basis of accounting in accordance with generally accepted accounting principles in the United States of America. Financial statement presentation follows the recommendations of the Financial Accounting Standards Board in its Accounting Standards Codification (ASC) Topic 958, Not-for-Profit Entities. Under ASC 958, the Organization is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions. A description of the net asset categories are as follows:

Net assets without donor restrictions – Net assets that are not subject to donor-imposed restrictions.

Net assets with donor restrictions – Net assets contain donor-imposed stipulations that restrict the use of the donated assets. A donor-imposed restriction expires when the time stipulated in the restriction elapses, the purpose stipulated in the restriction has been fulfilled, or both. The expiration of a donor-imposed restriction is recognized by reporting a reclassification of net assets in the statement of activities in the period the restriction expires. Such transfers are reported in the statement of activities as “net assets released from restrictions.”

C. Cash and Cash Equivalents

Cash and cash equivalents consist of short-term, highly liquid investments which are readily convertible into cash within ninety (90) days of purchase. Carrying value of cash and cash equivalents approximates fair value because of the short maturities of those financial instruments.

D. Investments

Investments are initially recorded at fair value under the provisions of fair value measurement and disclosures codified in ASC 820, Fair Value Measurement. The Organization adjusts its investments to approximate fair value at each year-end.

Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investments, it is reasonably possible that changes in the values of these investments will occur in the near term and that such changes could materially affect the amounts reported in the accompanying financial statements.

E. Accounts Receivable

Renters are required to make deposits at the time the rental agreement is signed. These deposits are designed to ensure payment of final rent and to protect the Organization against financial loss from damage to property. Accounts receivable are stated at the amount management expects to collect from outstanding balances. No allowance for doubtful accounts has been established as management expects to collect all accounts owed to the Organization.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2023 and 2022

**NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)**

F. Contributions

Contributions are recognized in the period received or pledged unconditionally. Conditional promises to give are not recognized until the conditions on which they depend are substantially met. All contributions are considered available for unrestricted use unless specifically restricted by the donor. Amounts received that are designated for future periods or are restricted by the donor for specific purposes are reported as net assets with donor restrictions. Amounts required to be maintained in perpetuity by the donor are reported as net assets that are perpetual in nature. A donor restriction expires when a time restriction ends or when the purpose for which it was intended is satisfied. When a restriction expires, nets assets with donor restrictions are reclassified to net assets without donor restrictions and are reported in the Statement of Activities as net assets released from restrictions.

G. Income Taxes

The Organization is organized under the laws of the State of Florida as a nonprofit corporation and was recognized as such by the State of Florida. The Organization is also recognized by the Internal Revenue Service as a nonprofit corporation under section 501(c)(3) of the Internal Revenue Code. Therefore, no provision for income taxes has been made in the accompanying financial statements. The Organization is required to file Form 990 to the Internal Revenue Service.

H. Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions. This will affect the reported amounts of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from these estimates.

I. Subsequent Events

The Organization has evaluated subsequent events for potential recognition and/or disclosure in the financial statements through September 22, 2023, the date the financial statements were available to be issued.

J. Functional Expense Allocation

The costs of providing the various programs and other activities have been detailed in the Statement of Functional Expenses and summarized on a functional basis in the Statement of Activities and Changes in Net Assets. Expenses directly related to a program or supporting service are charged to the individual program or supporting service. Indirect expenses are allocated between program services and general and administrative expenses based on the time spent by AMR's staff in performance of these functions or by the percentage paid for supporting services.



**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2023 and 2022

**NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)**

**K. Recent Accounting Pronouncements**

**Leases:** In February 2016, the FASB issued ASU 2016-02, Leases (Topic 842) (ASU 2016-02). The main principle of this revised accounting guidance requires that lessees recognize all leases (other than leases with a term of twelve months or less) on the balance sheet as lease liabilities, based upon the present value of the lease payments, with corresponding right of use assets. ASU 2016-02 also makes targeted changes to other aspects of the current guidance, including the lease classification criteria and the lessor accounting model. The amendments in ASU 2016-02 are effective for the Organization for annual reporting periods beginning after December 15, 2021. However, this guidance will not affect the current leases because they are short-term leases.

**NOTE 2 – CASH & CDS**

All accounts are recorded in the Organization’s name and those accounts which are restricted are identified with an appropriate title. Cash is restricted for escrow deposits.

The Organization has one certificate of deposit for \$76,354 maturing November 7, 2023, and one certificate of deposit for \$163,764 maturing February 1, 2024.

The Organization maintains most of its cash at a federally insured financial institution. Accounts are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000 for each institution. As of June 30, 2023, \$157,370 was uninsured.

**NOTE 3 – INVESTMENTS**

Investments consist of the following as of June 30, 2023:

	Market Value	Cost	Unrealized Gains or (Losses)
Cash	\$ 325	\$ 325	\$ -
Certificates of deposit	81,588	82,000	(412)
<b>Total</b>	<b>\$ 81,913</b>	<b>\$ 82,325</b>	<b>\$ (412)</b>
Change in unrealized gain (loss) on sale of investments			\$ (412)
Net investment return			\$ (412)

Investments owned by the Organization are held in safekeeping by the brokerage firm. The brokerage firm has not provided any collateral to insure the Organization against possible losses. Therefore, the Organization’s investments as of June 30, 2023 were all exposed to credit risk.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2023 and 2022

**NOTE 4 – FAIR VALUE MEASUREMENTS**

Accounting principles generally accepted in the United States of America establish a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described below:

- (i) Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Organization can access.
- (ii) Level 2 - Inputs to the valuation methodology include:
  - quoted prices for similar assets or liabilities in active markets;
  - quoted prices for identical or similar assets or liabilities in inactive markets;
  - inputs other than quoted prices that are observable for the asset or liability;
  - inputs that are derived principally from or corroborated by observable market data by correlation or by other means.
- (iii) Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The Organization’s investments are measured on a recurring basis at Level 1 of the fair value hierarchy.

**NOTE 5 – PROPERTY AND EQUIPMENT**

Acquisitions of property and equipment greater than \$2,500 with a useful life of one year or more are capitalized. Property and equipment are carried at cost or, if donated, at the approximate fair value at the date of donation. Depreciation is computed using primarily the straight-line method.

The following is a summary of property and equipment at cost less accumulated depreciation:

	Beginning Balance 6/30/2022	Additions	Disposals	Ending Balance 6/30/2023
Land	\$ 730,513	\$ -	\$ -	\$ 730,513
Buildings & improv.	3,880,219	-	-	3,880,219
Appliances & fixtures	746,687	374,594	(50,492)	1,070,789
Equipment	37,199	-	-	37,199
Total property & equipment	5,394,618	374,594	(50,492)	5,718,720
Less: accum. depreciation	(2,765,227)	(187,525)	49,011	(2,903,741)
Imputed interest adjustment	181,283	40,473	-	221,756
Net property & equipment	<u>\$ 2,810,674</u>	<u>\$ 227,542</u>	<u>\$ (1,481)</u>	<u>\$ 3,036,735</u>

Depreciation expense before the imputed interest adjustment was \$187,525 and \$178,015 for the year ended June 30, 2023 and 2022, respectively.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2023 and 2022

**NOTE 6 – PROJECT COSTS**

Project costs are capitalized and amortized using the straight-line method. They are being amortized over various terms from 5 to 30 years.

The following is a summary of project costs less accumulated amortization:

	Beginning Balance 6/30/2022	Additions	Disposals	Ending Balance 6/30/2023
Amortizable project costs	\$ 320,727	\$ -	\$ -	\$ 320,727
Less: accum. amortization	(255,278)	(10,691)	-	(265,969)
Net project costs	\$ 65,449	\$ (10,691)	\$ -	\$ 54,758

**NOTE 7 – CONSTRUCTION IN PROGRESS**

Construction in progress of \$397,165 as of June 30, 2023 is for the Phoenix Project. AMR is in the process of building the first tiny home community. The goal of the Phoenix Project is to develop a total of 14 tiny home communities consisting of approximately 12 homes each. These tiny home communities will provide sustainable and safe housing solutions for individuals who are financially, socially, or institutionally disadvantaged.

**NOTE 8 – LONG-TERM DEBT**

AMR at Pensacola, Inc. has loans payable with several financial institutions, the Florida Housing Finance Agency, Escambia County, Florida, and a related party. Loans payable at June 30, 2023 are summarized as follows:

A. Hancock Bank

The mortgage held by Hancock Bank had a balance of \$170,475 and \$190,854 at June 30, 2023 and 2022, respectively. Principal and interest, at a rate of 3.75%, is paid monthly. The mortgage is secured by certain rental real property of the Organization.

B. Cadence Bank

- i. Pensacola Affordables Loan: The mortgage held by Cadence Bank had a balance of \$406,373 and \$432,794 at June 30, 2023 and 2022, respectively. Principal and interest, at a fixed rate of 3.99%, is paid monthly until April 26, 2026 when the rate will change to Prime+1% through the November 26, 2035 maturity date. The mortgage is secured by certain rental real property of the Organization.
- ii. Tiny Home Loan: In October 2022, the Organization converted a line-of-credit to a loan for \$67,000. The principal balance was \$65,044 and \$67,275 as of June 30, 2023 and 2022, respectively. Principal and interest, at a fixed rate of 5.50%, is paid monthly until October 18, 2027 when the rate will change to Prime+0.5% through the October 17, 2037 maturity date. The mortgage is secured by certain rental real property of the Organization.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2023 and 2022

**NOTE 8 – LONG-TERM DEBT (CONTINUED)**

C. Florida Housing Finance Agency (FHFA)

- i. State Apartment Incentive Loan (SAIL): This is a 20-year mortgage note with an original principal amount of \$328,500. The principal balance outstanding is \$227,532 and \$243,300 as of June 30, 2023 and 2022, respectively. Principal and interest, at a rate of 1%, is paid monthly. The loan matures in November 2036. The mortgage is secured by certain rental real property of the corporation.
  - a. Belmont Street Housing: At the request of the loan servicer for the Florida Housing Finance Agency, a separate escrow account was established for the purpose of depositing monies for insurance premiums, real estate taxes, and funds reserved for replacements. This account is held at Cadence Bank and had a balance of \$26,924 and \$26,190 as of June 30, 2023 and 2022, respectively. The mortgage holder has placed a hold on this account so that no funds, other than interest, can be withdrawn without the consent of the Florida Housing Finance Agency and/or its servicing agent.
- ii. HOME Investment Partnerships Loan (HOME): These mortgage notes totaled \$508,617 and \$538,750 as of June 30, 2023 and 2022, respectively, with zero percent (0%) interest per annum on the outstanding principal balances, provided that during any period wherein the maker is not in compliance with Rule Chapter 91-34.10, Florida Administrative Code, these mortgage notes shall bear interest at the rate of three percent (3%) per annum on the outstanding principal balances. The balloon payments will mature at various dates.
  - a. Lillian Street Housing: At the request of the loan servicer for the Florida Housing Finance Agency, a separate escrow account was established for the purpose of depositing monies for insurance premiums, real estate taxes, and funds reserved for replacements. This account is held at Cadence Bank and had a balance of \$16,205 and \$13,971 at June 30, 2023 and 2022, respectively.
  - b. Zarragossa Street Housing: At the request of the loan servicer for the Florida Housing Finance Agency, a separate escrow account was established for the purpose of depositing monies for insurance premiums, real estate taxes, and funds reserved for replacements. This account is held at Cadence Bank and had a balance of \$9,643 and \$8,022 at June 30, 2023 and 2022, respectively.

D. Escambia County, Florida

A mortgage note totaling \$128,625 and \$147,000 was outstanding at June 30, 2023 and 2022, respectively. No interest or principal is due as long as the housing is maintained for low-income rental purposes. In addition, Escambia County, Florida has agreed to forgive the annualized installment of the loan as long as the Organization continues to maintain the rental units for purposes specified above. The annualized installment forgiven was \$18,375 and \$18,375 during the years ended June 30, 2023 and 2022, respectively, and are listed as mortgage forgiveness income on the Statements of Activities and Changes in Net Assets.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2023 and 2022

**NOTE 8 – LONG-TERM DEBT (CONTINUED)**

E. The First Bank

AMR signed a note with The First Bank in February 2023 for \$150,465. The principal balance was \$144,233 at June 30, 2023. AMR will pay this loan in 24 principal payments of \$6,000 each and one final principal and interest payment of \$6,576.08. AMR's first principal payment is due May 10, 2023, and all subsequent principal payments are due on the same day of each quarter after that. In addition, AMR will pay regular quarterly payments of all accrued unpaid interest due as of each payment date, beginning May 10, 2023, with all subsequent interest payments to be due on the same day of each quarter after that. Borrower's final payment due May 10, 2029, will be for all principal and all accrued interest not yet paid. The note is secured by a \$75,000 CD held at the bank.

F. Synovus Bank

AMR signed a construction loan agreement with Synovus Bank in January 2023 for \$924,912. The principal balance of construction draws was \$269,683 at June 30, 2023. Interest only payments, at a rate of 5.83%, are made for 18 months followed by 66 months of principal and interest payments. The note is secured by 3 parcels of real estate.

G. Due to Related Party

AMR has a loan payable to the founding board member/registered agent with a principal balance of \$26,000 as of June 30, 2023. There is no interest charged on this loan. Payments of \$1,000 are made monthly.

H. Debt Issuance Costs

Debt issuance costs are presented as a reduction of the carrying amount of the debt rather than as an asset. Amortization of the debt issuance costs is reported as interest expense on the income statement. Unamortized debt issuance costs were \$34,029 and \$19,739 at June 30, 2023 and 2022, respectively. Debt issuance costs amortized to interest expense were \$4,651 and \$1,945 for the years ending June 30, 2023 and 2022, respectively.

I. Imputed Interest

FASB ASC 835-30 also applies to the presentation of imputed interest. If a note does not have a market rate of interest, interest must be imputed at a market rate of interest. A discount exists if the present value of the note's future cash flows is less than the face amount of the note. The discount is amortized as interest expense over the life of the note. Amortization is computed using the interest method. The discount is subtracted from the related note balance. We noted that all three loans with Florida Housing were below a market rate of interest. The loans for Zarragossa (0%), Belmont (1%), and Lillian (0%) are all below a market rate of interest. Imputed interest was calculated at 5% which is comparable to the market rate if these loans had to be refinanced with another lender. The imputed interest discount for all three loans totaled \$381,093. The amount amortized to interest expense totaled \$23,648 and \$24,653 for the years ended June 30, 2023 and 2022, respectively. The discount remaining to be amortized totaled \$239,681 as of June 30, 2023.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2023 and 2022

**NOTE 8 – LONG-TERM DEBT (CONTINUED)**

The annual requirements to amortize all debts outstanding as of June 30, 2023 are as follows:

	Hancock Bank	Cadence Bank	FL Housing Finance	Escambia County, FL	The First Bank	Synovus	Due to Related Party	Totals
7/1/23-6/30/24	\$ 21,095	\$ 28,831	\$ 46,060	\$ 18,375	\$ 24,000	\$ -	\$ 26,000	\$ 164,361
7/1/24-6/30/25	21,928	30,122	46,220	18,375	24,000	134,593	-	275,238
7/1/25-6/30/26	127,452	31,414	46,381	18,375	24,000	155,442	-	403,064
7/1/26-6/30/27	-	32,763	46,544	18,375	24,000	164,883	-	286,565
7/1/27-6/30/28	-	34,132	46,709	18,375	24,000	174,839	-	298,055
Thereafter	-	314,155	504,233	36,750	24,233	295,155	-	1,174,526
Total	<u>\$ 170,475</u>	<u>\$ 471,417</u>	<u>\$ 736,147</u>	<u>\$ 128,625</u>	<u>\$ 144,233</u>	<u>\$ 924,912</u>	<u>\$ 26,000</u>	<u>\$2,601,809</u>
							Debt issuance costs	(34,029)
							Imputed interest discount	(239,681)
							Principal not yet drawn	(655,229)
							Less current portion	(164,361)
							Notes payable, less current portion	<u>\$ 1,508,509</u>

Interest expense for the years ended June 30, 2023 and 2022 totaled \$60,825 and \$58,068, respectively.

**NOTE 9 – SECTION 8 HAP AND MANAGEMENT CONTRACT AGREEMENT**

Gulf Coast Property Management Co., Inc. manages the Lillian, Belmont, and Zarragossa apartments pursuant to a management agreement with AMR at Pensacola, Inc. These units receive rental assistance from the U.S. Department of Housing and Urban Development through the Section 8 Program.

**NOTE 10 – RESIDENCY VESTING PROGRAM**

On the Belmont, Lillian, and Zarragossa projects, AMR at Pensacola, Inc. has agreed, under terms of certain financing arrangements, to participate in a home ownership program whereby AMR at Pensacola, Inc. will provide five percent (5%) of the tenant-paid net rent towards down payment assistance for a tenant purchasing a home, provided the tenant has participated in financial counseling provided free to the tenant, and the tenant remains a responsible tenant. The five percent credit is subject to the tenant paying rent on time and not violating the lease. If the tenant violates the lease, the tenant will lose credit for the month(s) so violated.

If the tenant cures the violation, the tenant can continue in the program. On the Lillian project, there is a three (3) year continuous residency-vesting period for the credit. Throughout the twenty-year history of the program, AMR has never been liable for a significant amount of rent. Therefore, as of June 30, 2023, the possible liability would be insignificant to the financial statements as a whole.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2023 and 2022

**NOTE 11 – LEASES**

AMR leases property for storage, repairs, and security of AMR's vehicles and equipment. The lease is on a year-to-year basis. Lease payments are \$18,000 per year.

AMR leases office space due to the increase in staff working on the tiny home project. The lease is on a year-to-year basis. Payments totaled \$8,325 and \$7,425 for the year ended June 30, 2023 and 2022, respectively.

**NOTE 12 – RELATED PARTIES**

For the year ended June 30, 2023, payments totaling \$379,634 were paid to a company owned by a Board member for construction costs associated with the Phoenix Project. As mentioned in **Note 7**, the goal of the Phoenix Project is to develop a total of 14 tiny home communities consisting of approximately 12 homes each. AMR is in the process of building the first tiny home community. AMR receives receipts for construction costs and pays an additional 5-10% for contractor overhead costs.

The founding board member/registered agent of AMR runs multiple businesses from one office location. Employees share their time between these businesses and document hours worked at each. Payroll reimbursement expense is paid to a company owned by this related party to reimburse for AMR's portion of payroll. This company has better benefit options than AMR which is why employees are paid through this company and then reimbursed. For the year ended June 30, 2023, payroll reimbursement expense paid to related parties totaled \$164,272.

Payroll reimbursement income is time paid through AMR that is spent on other companies owned by the founding board member/registered agent. These companies pay AMR as reimbursement. For the year ended June 30, 2023, payroll reimbursement income received from related parties totaled \$73,281.

Other reimbursement income and expenses are paid to related party companies for reimbursements for supplies, maintenance, dues, appliances, etc. For the year ended June 30, 2023, other reimbursement income and expenses paid to related parties totaled \$3,967 and \$1,565, respectively.

As mentioned in **Note 8 D.**, AMR has a loan payable to the founding board member/registered agent with a principal balance of \$26,000 as of June 30, 2023. There is no interest charged on this loan. Payments of \$1,000 are made monthly.



**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2023 and 2022

**NOTE 13 – AVAILABILITY OF FINANCIAL ASSETS**

The following reflects the Organization’s financial assets as of June 30, 2023, reduced by amounts not available for general use because of contractual or donor-imposed restrictions within one year of the balance sheet date:

Financial assets at 6/30/23	\$ 865,999
Less those unavailable for general expenditure within one year, due to:	
Cash restricted for escrow deposits	(52,772)
Donor restrictions	<u>(232,500)</u>
Financial assets available to meet cash needs for general expenditures within one year	<u>\$ 580,727</u>

As part of the Organization’s liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due.

## **SUPPLEMENTARY INFORMATION**

**AMR at Pensacola, Inc.**  
**Belmont Duplexes**  
Statement of Financial Position  
As of June 30, 2023

**ASSETS**

**Current Assets**

Cash - restricted	\$	26,924
Cash - unrestricted		82,187
Total cash		109,111
Certificate of deposit		46,196
Accounts receivable		20,996
Prepaid expenses		17,387
Security deposits receivable		19,710
Total current assets		213,400

**Non-Current Assets**

Land		134,584
Buildings (rental units)		880,991
Appliances and fixtures		256,515
Accumulated depreciation		(893,370)
Utility deposits		65
Total non-current assets		378,785

<b>Total Assets</b>	<b>\$</b>	<b>592,185</b>
---------------------	-----------	----------------

**LIABILITIES & NET ASSETS**

**Current Liabilities**

Accounts payable	\$	1,408
Salaries and wages payable		926
Security deposits		20,210
Current portion of long-term debt: SAIL loan		15,927
Total current liabilities		38,471

**Long-Term Liabilities**

Note payable, less current portion: SAIL loan (Net of \$52,306 of imputed interest discount and \$5,772 of debt issuance costs)		153,526
Total long-term liabilities		153,526

<b>Total Liabilities</b>		<b>191,997</b>
--------------------------	--	----------------

**Net Assets**

Net assets without donor restrictions		400,188
---------------------------------------	--	---------

<b>Total Liabilities and Net Assets</b>	<b>\$</b>	<b>592,185</b>
---	-----------	----------------

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Belmont Duplexes**  
Statement of Activities and Changes in Net Assets  
For the year ended June 30, 2023

<b>Revenue</b>	
Dwelling rental revenue	\$ 245,193
Interest income	64
Other income	628
Total revenue	245,885
<b>Expenses</b>	
Administration fees	400
Depreciation and amortization	35,239
Insurance	28,111
Interest expense	9,878
Management and compliance fees	18,755
Miscellaneous	726
Office supplies	162
Payroll expenses	40,721
Professional fees	6,080
Repairs and maintenance	31,904
Taxes and licenses	3,309
Utilities	1,682
Total expenses	176,967
<b>Change in Net Assets</b>	68,918
<b>Net Assets - Beginning of Year</b>	331,270
<b>Net Assets - End of Year</b>	\$ 400,188

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Belmont Duplexes**  
Statement of Cash Flows  
For the year ended June 30, 2023

<b>Cash Flows from Operating Activities</b>	
Change in net assets	\$ 68,918
Adjustments to reconcile change in net assets to net cash from operating activities:	
Amortization of debt issuance costs	432
Depreciation and amortization	35,239
Discount amortization	7,086
Loss on disposal of assets	67
Changes in operating assets and liabilities:	
Accounts receivable	(4,947)
Prepaid expenses	8,634
Security deposits receivable	(2,434)
Accounts payable	(4,950)
Salaries and wages payable	267
Security deposits	2,434
Net cash from operating activities	110,746
 <b>Cash Flows from Investing Activities</b>	
Acquisition of equipment	(96,459)
Net cash from investing activities	(96,459)
 <b>Cash Flows from Financing Activities</b>	
Principal payments on long-term debt	(15,768)
Net cash from financing activities	(15,768)
<b>Net Change in Cash</b>	(1,481)
<b>Cash - Beginning of Year</b>	110,592
<b>Cash - End of Year</b>	\$ 109,111

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Lillian Elderly**  
Statement of Financial Position  
As of June 30, 2023

**ASSETS**

<b>Current Assets</b>	
Cash - restricted	\$ 16,205
Certificate of deposit	119,873
Accounts receivable	4,665
Prepaid insurance	6,824
Security deposits receivable	7,084
Total current assets	154,651
 <b>Non-Current Assets</b>	
Land	40,000
Buildings (rental units)	271,871
Appliances and fixtures	117,507
Accumulated depreciation	(297,121)
Amortizable project costs	152,741
Accumulated amortization	(123,253)
Total non-current assets	161,745
 <b>Total Assets</b>	 \$ 316,396

**LIABILITIES & NET ASSETS**

<b>Current Liabilities</b>	
Accounts payable	\$ 3,133
Due to AMR operating	144,746
Salaries and wages payable	293
Security deposits	7,084
Current portion of long-term debt: HOME loan	14,233
Total current liabilities	169,489
 <b>Long-Term Liabilities</b>	
Note payable, less current portion: HOME Loan (Net of \$155,231 of imputed interest discount and \$4,435 of debt issuance costs)	185,493
Total long-term liabilities	185,493
 <b>Total Liabilities</b>	 354,982
 <b>Net Assets</b>	
Net asset deficit	(38,586)
Total net assets	(38,586)
 <b>Total Liabilities and Net Assets</b>	 \$ 316,396

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Lillian Elderly**  
Statement of Activities and Changes in Net Assets  
For the year ended June 30, 2023

<b>Revenue</b>	
Dwelling rental revenue	\$ 82,382
Interest income	35
Other income	50
Total revenue	82,467
 <b>Expenses</b>	
Administration fees	86
Depreciation and amortization	4,640
Insurance	12,320
Interest expense	10,407
Management and compliance fees	6,627
Miscellaneous	245
Office supplies	62
Payroll expenses	13,597
Professional fees	2,137
Repairs and maintenance	13,786
Taxes and licenses	2,383
Utilities	7,978
Total expenses	74,268
<b>Change in Net Assets</b>	8,199
<b>Net Assets - Beginning of Year</b>	(46,785)
<b>Net Assets - End of Year</b>	\$ (38,586)

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Lillian Elderly**  
Statement of Cash Flows  
For the year ended June 30, 2023

<b>Cash Flows from Operating Activities</b>	
Change in net assets	\$ 8,199
Adjustments to reconcile change in net assets to net cash from operating activities:	
Amortization of debt issuance costs	177
Depreciation and amortization	4,640
Discount amortization	10,230
Changes in operating assets and liabilities:	
Accounts receivable	765
Prepaid insurance	6,344
Security deposits receivable	(298)
Accounts payable	1,947
Due to AMR operating	47,725
Salaries and wages payable	85
Security deposits	558
Net cash from operating activities	80,372
 <b>Cash Flows from Investing Activities</b>	
Acquisition of equipment	(63,905)
Net cash from investing activities	(63,905)
 <b>Cash Flows from Financing Activities</b>	
Principal payments on long-term debt	(14,233)
Net cash from financing activities	(14,233)
 <b>Net Change in Cash</b>	 2,234
<b>Cash - Beginning of Year</b>	 13,971
<b>Cash - End of Year</b>	\$ 16,205

See auditor's report on supplementary information.



**AMR at Pensacola, Inc.**  
**Zarragossa Street**  
Statement of Financial Position  
As of June 30, 2023

**ASSETS**

<b>Current Assets</b>	
Cash - restricted	\$ 9,643
Certificate of deposit	40,440
Accounts receivable	7,738
Prepaid insurance	1,891
Security deposits receivable	5,710
Total current assets	65,422
<b>Non-Current Assets</b>	
Land	40,000
Buildings (rental units)	244,063
Appliances and fixtures	89,076
Accumulated depreciation	(255,778)
Amortizable project costs	103,461
Accumulated amortization	(87,970)
Total non-current assets	132,852
<b>Total Assets</b>	\$ 198,274

**LIABILITIES & NET ASSETS**

<b>Current Liabilities</b>	
Accounts payable	\$ 1,341
Due to AMR operating	45,590
Salaries and wages payable	342
Security deposits	5,710
Current portion of long-term debt: HOME loan	15,900
Total current liabilities	68,883
<b>Long-Term Liabilities</b>	
Note payable, less current portion: HOME loan (Net of \$32,144 of imputed interest discount and \$3,412 of debt issuance costs)	97,769
Total long-term liabilities	97,769
<b>Total Liabilities</b>	166,652
<b>Net Assets</b>	
Net assets without donor restrictions	31,622
Total net assets	31,622
<b>Total Liabilities and Net Assets</b>	\$ 198,274

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Zarragossa Street**  
Statement of Activities and Changes in Net Assets  
For the year ended June 30, 2023

<b>Revenue</b>	
Dwelling rental revenue	\$ 76,833
Interest income	20
Total revenue	76,853
 <b>Expenses</b>	
Depreciation and amortization	11,526
Insurance	4,453
Interest expense	6,693
Management and compliance fees	6,151
Miscellaneous	619
Office supplies	35
Payroll expenses	12,674
Professional fees	2,000
Repairs and maintenance	5,876
Taxes and licenses	826
Total expenses	50,853
<b>Change in Net Assets</b>	26,000
<b>Net Assets - Beginning of Year</b>	5,622
<b>Net Assets - End of Year</b>	\$ 31,622

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Zarragossa Street**  
Statement of Cash Flows  
For the year ended June 30, 2023

<b>Cash Flows from Operating Activities</b>	
Change in net assets	\$ 26,000
Adjustments to reconcile change in net assets to net cash from operating activities:	
Amortization of debt issuance costs	361
Depreciation and amortization	11,526
Discount amortization	6,332
Loss on disposal of assets	393
Changes in operating assets and liabilities:	
Accounts receivable	(1,841)
Prepaid insurance	(475)
Security deposits receivable	(25)
Accounts payable	(230)
Due to AMR operating	(24,644)
Salaries and wages payable	99
Security deposits	25
Net cash from operating activities	<u>17,521</u>
 <b>Cash Flows from Financing Activities</b>	
Principal payments on long-term debt	<u>(15,900)</u>
Net cash from financing activities	<u>(15,900)</u>
 <b>Net Change in Cash</b>	 1,621
<b>Cash - Beginning of Year</b>	<u>8,022</u>
<b>Cash - End of Year</b>	<u><u>\$ 9,643</u></u>

See auditor's report on supplementary information.

**AMR AT PENSACOLA, INC.**  
AUDITED FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2024 AND 2023  
DURST JORDAN, CPA, PA

## TABLE OF CONTENTS

	PAGE
Independent Auditor's Report	1
<b>Financial Statements:</b>	
Statements of Financial Position	3
Statements of Activities and Changes in Net Assets	4
Statement of Functional Expenses - 2024	5
Statement of Functional Expenses - 2023	6
Statements of Cash Flows	7
Notes to the Financial Statements	8
<b>Supplementary Information:</b>	
Statements of Financial Position, Activities and Changes in Net Assets, and Cash Flows by Property	19



4459-B Hwy. 90  
Pace, Florida 32571  
Phone: (850) 995-5000

## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of  
AMR at Pensacola, Inc.

### Opinion

We have audited the accompanying financial statements of AMR at Pensacola, Inc. (a nonprofit organization), which comprise the statements of financial position as of as of June 30, 2024 and 2023, and the related statements of activities and changes in net assets, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of AMR at Pensacola, Inc. as of June 30, 2024 and 2023, and the changes in its net assets, functional expenses, and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of AMR at Pensacola, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about AMR at Pensacola, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional

omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

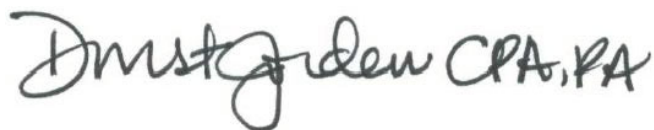
In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of AMR at Pensacola, Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about AMR at Pensacola, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

### **Supplementary Information**

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The "Statements of Financial Position, Activities and Changes in Net Assets, and Cash Flows by Property" are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.



Pace, FL  
September 25, 2024

**AMR at Pensacola, Inc.**  
Statements of Financial Position  
As of June 30, 2024 and 2023

<b>ASSETS</b>		
	<b>2024</b>	<b>2023</b>
<b>Current Assets</b>		
Cash - unrestricted	\$ 162,849	\$ 383,692
Cash - restricted	59,960	52,772
Total cash	<u>222,809</u>	<u>436,464</u>
Certificates of deposit	248,977	240,118
Investments	294,271	81,913
Accounts receivable	115,275	107,504
Pledges receivable, current	15,000	-
Prepaid expenses	115,636	90,383
Security deposits receivable	109,221	101,314
Total current assets	<u>1,121,189</u>	<u>1,057,696</u>
<b>Non-Current Assets</b>		
Pledges receivable, long-term	39,750	-
Property and equipment, net of accumulated depreciation of \$2,832,135 and \$2,681,985	4,307,855	3,036,735
Amortizable project costs, net of accumulated amortization of \$276,660 and \$265,969	44,067	54,758
Construction in progress	5,610	397,165
Utility deposits	2	2
Total non-current assets	<u>4,397,284</u>	<u>3,488,660</u>
<b>Total Assets</b>	<u><u>\$ 5,518,473</u></u>	<u><u>\$ 4,546,356</u></u>
<b>LIABILITIES &amp; NET ASSETS</b>		
<b>Current Liabilities</b>		
Accounts payable	\$ 6,917	\$ 15,848
Salaries and wages payable	12,561	8,776
Security deposits	112,901	102,744
Current portion of long-term debt	289,238	164,361
Total current liabilities	<u>421,617</u>	<u>291,729</u>
<b>Long-Term Liabilities</b>		
Long-term debt, net of imputed interest discount of \$217,084 and debt issuance costs of \$29,378 (less current portion)	<u>1,916,554</u>	<u>1,508,509</u>
<b>Total Liabilities</b>	2,338,171	1,800,238
<b>Net Assets</b>		
Net assets without donor restrictions	3,125,552	2,513,618
Net assets with donor restrictions	54,750	232,500
Total net assets	<u>3,180,302</u>	<u>2,746,118</u>
<b>Total Liabilities and Net Assets</b>	<u><u>\$ 5,518,473</u></u>	<u><u>\$ 4,546,356</u></u>

The accompanying notes are an integral part of these financial statements.



**AMR at Pensacola, Inc.**  
**Statements of Activities and Changes in Net Assets**  
For the years ended June 30, 2024 and 2023

	<b>2024</b>			<b>2023</b>
	<b>Without Donor Restrictions</b>	<b>With Donor Restrictions</b>	<b>Total</b>	<b>Total</b>
<b>Revenues and Support</b>				
Dwelling rental revenue	\$ 1,370,881	\$ -	\$ 1,370,881	\$ 1,261,510
Public support	-	234,750	234,750	232,500
Grants	-	4,552	4,552	155,445
In-kind contributions	17,893	-	17,893	-
Mortgage forgiveness income	18,375	-	18,375	18,375
Net investment return	12,358	-	12,358	(412)
Interest income	10,834	-	10,834	5,410
(Loss) gain on sale of assets	(134)	-	(134)	(1,480)
Insurance proceeds	1,147	-	1,147	6,578
Other income	11,843	-	11,843	4,920
Net assets released from restrictions	417,052	(417,052)	-	-
<b>Total Revenues and Support</b>	<b>1,860,249</b>	<b>(177,750)</b>	<b>1,682,499</b>	<b>1,682,846</b>
<b>Expenses</b>				
Program services	967,305	-	967,305	781,143
General and administrative	281,010	-	281,010	233,231
<b>Total Expenses</b>	<b>1,248,315</b>	<b>-</b>	<b>1,248,315</b>	<b>1,014,374</b>
<b>Change in Net Assets</b>	<b>611,934</b>	<b>(177,750)</b>	<b>434,184</b>	<b>668,472</b>
<b>Net Assets - Beginning of Year</b>	<b>2,513,618</b>	<b>232,500</b>	<b>2,746,118</b>	<b>2,077,646</b>
<b>Net Assets - End of Year</b>	<b>\$ 3,125,552</b>	<b>\$ 54,750</b>	<b>\$ 3,180,302</b>	<b>\$ 2,746,118</b>

The accompanying notes are an integral part of these financial statements.

**AMR at Pensacola, Inc.**  
Statement of Functional Expenses  
For the year ended June 30, 2024

	<b>Program Services</b>	<b>General and Administrative</b>	<b>Total</b>
Administration fees	\$ 4,888	\$ -	\$ 4,888
Depreciation and amortization	176,507	2,799	179,306
Donations	-	6,888	6,888
Dues and subscriptions	-	7,283	7,283
Facilities rental	-	26,403	26,403
Fuel	1,109	854	1,963
Honorariums	-	3,250	3,250
Insurance	140,086	15,035	155,121
Interest expense	111,143	-	111,143
Management and compliance fees	110,607	-	110,607
Meals and entertainment	-	2,320	2,320
Miscellaneous expense	-	1,116	1,116
Office supplies	-	16,779	16,779
Payroll expenses	168,200	137,619	305,819
Professional fees	-	37,041	37,041
Repairs and maintenance	197,030	292	197,322
Software and IT	-	8,619	8,619
Taxes and licenses	18,493	162	18,655
Travel expense	-	953	953
Utilities	39,242	13,597	52,839
<b>Total</b>	<b>\$ 967,305</b>	<b>\$ 281,010</b>	<b>\$ 1,248,315</b>

The accompanying notes are an integral part of these financial statements.

**AMR at Pensacola, Inc.**  
Statement of Functional Expenses  
For the year ended June 30, 2023

	<b>Program Services</b>	<b>General and Administrative</b>	<b>Total</b>
Administration fees	\$ 4,756	\$ -	\$ 4,756
Depreciation and amortization	153,378	4,366	157,744
Donations	-	2,550	2,550
Dues and subscriptions	-	5,492	5,492
Facilities rental	-	26,325	26,325
Fuel	40	3,248	3,288
Honorariums	-	5,000	5,000
Insurance	119,489	12,671	132,160
Interest expense	60,825	-	60,825
Management and compliance fees	102,739	-	102,739
Meals and entertainment	-	3,357	3,357
Miscellaneous expense	-	6,293	6,293
Office supplies	-	10,784	10,784
Payroll expenses	117,024	95,747	212,771
Professional fees	-	33,579	33,579
Repairs and maintenance	172,543	8,344	180,887
Taxes and licenses	14,256	116	14,372
Travel expense	-	1,241	1,241
Utilities	36,093	14,118	50,211
<b>Total</b>	<b>\$ 781,143</b>	<b>\$ 233,231</b>	<b>\$ 1,014,374</b>

The accompanying notes are an integral part of these financial statements.

**AMR at Pensacola, Inc.**  
**Statements of Cash Flows**  
For the years ended June 30, 2024 and 2023

	<b>2024</b>	<b>2023</b>
<b>Cash Flows from Operating Activities</b>		
Change in net assets	\$ 434,184	\$ 668,472
Adjustments to reconcile change in net assets to net cash from operating activities:		
Amortization of debt issuance costs	4,651	4,651
Depreciation and amortization	179,306	157,744
Discount amortization	22,597	23,648
Donated assets	(17,243)	-
Loss (gain) on sale of assets	134	1,480
Mortgage forgiveness	(18,375)	(18,375)
Net investment return	(12,358)	-
Noncash pledge, net of discount	(69,750)	-
Changes in operating assets and liabilities:		
Certificates of deposit	(8,859)	(3,592)
Accounts receivable	(7,771)	(21,135)
Prepaid expenses	(25,253)	(1,601)
Security deposits receivable	(7,907)	(11,533)
Accounts payable	(8,931)	(28,215)
Salaries and wages payable	3,785	1,407
Security deposits	10,157	11,533
Net cash from operating activities	478,367	784,484
<b>Cash Flows from Investing Activities</b>		
Net investment (purchases) sales	(200,000)	(81,913)
Additions to construction in progress	(901,304)	(386,785)
Acquisition of property & equipment	(129,767)	(374,594)
Net cash from investing activities	(1,231,071)	(843,292)
<b>Cash Flows from Financing Activities</b>		
Pledge collected	15,000	-
Debt proceeds	655,229	420,530
Debt issuance costs	-	(18,941)
Principal payments on debt	(131,180)	(113,547)
Net cash from financing activities	539,049	288,042
<b>Net Change in Cash</b>	(213,655)	229,234
<b>Cash - Beginning of Year</b>	436,464	207,230
<b>Cash - End of Year</b>	\$ 222,809	\$ 436,464

The accompanying notes are an integral part of these financial statements.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

A. Organization and Purpose

AMR at Pensacola, Inc. was formed on February 16, 1989 as a Florida corporation for the purpose of constructing and operating low-income rental housing units located in Escambia and Santa Rosa Counties, Florida. The major source of revenue is dwelling rental income, but the Organization also receives grants and public support.

B. Basis of Accounting and Presentation

The accompanying financial statements of the Organization have been prepared on the accrual basis of accounting in accordance with generally accepted accounting principles in the United States of America. Financial statement presentation follows the recommendations of the Financial Accounting Standards Board in its Accounting Standards Codification (ASC) Topic 958, Not-for-Profit Entities. Under ASC 958, the Organization is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions. A description of the net asset categories are as follows:

Net assets without donor restrictions – Net assets that are not subject to donor-imposed restrictions.

Net assets with donor restrictions – Net assets contain donor-imposed stipulations that restrict the use of the donated assets. A donor-imposed restriction expires when the time stipulated in the restriction elapses, the purpose stipulated in the restriction has been fulfilled, or both. The expiration of a donor-imposed restriction is recognized by reporting a reclassification of net assets in the statement of activities in the period the restriction expires. Such transfers are reported in the statement of activities as “net assets released from restrictions.”

C. Cash and Cash Equivalents

Cash and cash equivalents consist of short-term, highly liquid investments which are readily convertible into cash within ninety (90) days of purchase. Carrying value of cash and cash equivalents approximates fair value because of the short maturities of those financial instruments.

D. Investments

Investments are initially recorded at fair value under the provisions of fair value measurement and disclosures codified in ASC 820, Fair Value Measurement. The Organization adjusts its investments to approximate fair value at each year-end.

Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investments, it is reasonably possible that changes in the values of these investments will occur in the near term and that such changes could materially affect the amounts reported in the accompanying financial statements.

E. Accounts Receivable

Renters are required to make deposits at the time the rental agreement is signed. These deposits are designed to ensure payment of final rent and to protect the Organization against financial loss from damage to property. Accounts receivable are stated at the amount management expects to collect from outstanding balances. No allowance for doubtful accounts has been established as management expects to collect all accounts owed to the Organization.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)**

F. Pledges Receivable

Pledges are recognized in the period the pledge is made and recorded as revenue within net assets with donor restrictions. Pledges are discounted, using a market discount rate, to present the value for collections expected in future years. Accretion of the discount in subsequent years is also recorded as contribution revenue.

G. Contributions

Contributions are recognized in the period received or pledged unconditionally. Conditional promises to give are not recognized until the conditions on which they depend are substantially met. All contributions are considered available for unrestricted use unless specifically restricted by the donor. Amounts received that are designated for future periods or are restricted by the donor for specific purposes are reported as net assets with donor restrictions. Amounts required to be maintained in perpetuity by the donor are reported as net assets that are perpetual in nature. A donor restriction expires when a time restriction ends or when the purpose for which it was intended is satisfied. When a restriction expires, nets assets with donor restrictions are reclassified to net assets without donor restrictions and are reported in the Statement of Activities as net assets released from restrictions.

H. Contributions of Nonfinancial Assets

The Organization records various types of contributed nonfinancial assets (in-kind contributions) including furniture, supplies, and expenses for the tiny home projects. Contributed professional services are recognized if the services received (a) create or enhance long-lived assets or (b) require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. Contributions of tangible assets are recognized at fair value when received. All contributions are considered to be available for unrestricted use unless specifically restricted by the donor.

I. Income Taxes

The Organization is organized under the laws of the State of Florida as a nonprofit corporation and was recognized as such by the State of Florida. The Organization is also recognized by the Internal Revenue Service as a nonprofit corporation under section 501(c)(3) of the Internal Revenue Code. Therefore, no provision for income taxes has been made in the accompanying financial statements. The Organization is required to file Form 990 to the Internal Revenue Service.

J. Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions. This will affect the reported amounts of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from these estimates.

K. Subsequent Events

The Organization has evaluated subsequent events for potential recognition and/or disclosure in the financial statements through September 25, 2024, the date the financial statements were available to be issued.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)**

L. Functional Expense Allocation

The costs of providing the various programs and other activities have been detailed in the Statement of Functional Expenses and summarized on a functional basis in the Statement of Activities and Changes in Net Assets. Expenses directly related to a program or supporting service are charged to the individual program or supporting service. Indirect expenses are allocated between program services and general and administrative expenses based on the time spent by AMR's staff in performance of these functions or by the percentage paid for supporting services.

**NOTE 2 – CASH & CDS**

All accounts are recorded in the Organization's name and those accounts which are restricted are identified with an appropriate title. Cash is restricted for escrow deposits.

The Organization has one certificate of deposit for \$201,350 maturing May 2, 2025, and one certificate of deposit for \$79,535 maturing February 7, 2025.

The Organization maintains most of its cash and CDs at a federally insured financial institution. Accounts are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000 for each institution. As of June 30, 2024, the Organization had no uninsured cash balances.

**NOTE 3 – INVESTMENTS**

The investment portfolio consisted of the following as of June 30, 2024:

	Market Value	Cost	Unrealized Gains or (Losses)
Cash and equivalents	\$ 13,387	\$ 13,387	\$ -
Certificates of deposit	280,884	281,179	(295)
Total	<u>\$ 294,271</u>	<u>\$ 294,566</u>	<u>\$ (295)</u>

The investment portfolio consisted of the following as of June 30, 2023:

	Market Value	Cost	Unrealized Gains or (Losses)
Cash and equivalents	\$ 325	\$ 325	\$ -
Certificates of deposit	81,588	82,000	(412)
Total	<u>\$ 81,913</u>	<u>\$ 82,325</u>	<u>\$ (412)</u>

Investments are recorded as short-term because they mature/expire within a year of the balance sheet date.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 3 – INVESTMENTS (CONTINUED)**

Investment return for the year ended June 30, 2024 is summarized as follows:

Dividend and interest income	\$	12,416
Fees		(175)
Change in unrealized gain		117
Net investment return	\$	12,358

**NOTE 4 – FAIR VALUE MEASUREMENTS**

Accounting principles generally accepted in the United States of America establish a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described below:

- (i) Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Organization can access.
- (ii) Level 2 - Inputs to the valuation methodology include:
  - quoted prices for similar assets or liabilities in active markets;
  - quoted prices for identical or similar assets or liabilities in inactive markets;
  - inputs other than quoted prices that are observable for the asset or liability;
  - inputs that are derived principally from or corroborated by observable market data by correlation or by other means.
- (iii) Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The Organization’s investments are measured on a recurring basis at Level 1 of the fair value hierarchy.

**NOTE 5 – PLEDGES RECEIVABLE**

Pledges receivable as of June 30, 2024 are due as follows:

In one year or less	\$	15,000
Between one and five years		45,000
Five or more years		-
Total pledges receivable		60,000
Less: discount on net present value		(5,250)
Pledges receivable, net		54,750
Less: pledges receivable, current		(15,000)
Pledges receivable, long-term	\$	39,750

The discount rate used to calculate net present value is 4.23%.



**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 6 – PROPERTY AND EQUIPMENT**

Acquisitions of property and equipment greater than \$2,500 with a useful life of one year or more are capitalized. Property and equipment are carried at cost or, if donated, at the approximate fair value at the date of donation. Depreciation is computed using primarily the straight-line method.

The following is a summary of property and equipment at cost less accumulated depreciation:

	Beginning Balance 6/30/2023	Additions	Disposals	Ending Balance 6/30/2024
Land	\$ 730,513	\$ -	\$ -	\$ 730,513
Buildings & improv.	3,880,219	1,300,317	-	5,180,536
Appliances & fixtures	1,070,789	139,552	(8,244)	1,202,097
Equipment	37,199	-	(10,355)	26,844
Total property & equipment	5,718,720	1,439,869	(18,599)	7,139,990
Less: accum. depreciation	(2,903,741)	(209,088)	18,465	(3,094,364)
Imputed interest adjustment	221,756	40,473	-	262,229
Net property & equipment	<u>\$ 3,036,735</u>	<u>\$ 1,271,254</u>	<u>\$ (134)</u>	<u>\$ 4,307,855</u>
Construction in progress	\$ 397,165	\$ 901,304	\$ (1,292,859)	\$ 5,610

Depreciation expense before the imputed interest adjustment was \$209,088 and \$187,525 for the year ended June 30, 2024 and 2023, respectively.

As of June 30, 2023, construction in progress was \$397,165 for the first phase of the Phoenix Project. The first phase was completed in the current year and \$1,292,859 was capitalized. As of June 30, 2024, construction in progress of \$5,610 is for a tiny home project in Escambia County.

**NOTE 7 – PROJECT COSTS**

Project costs are capitalized and amortized using the straight-line method. They are being amortized over various terms from 5 to 30 years.

The following is a summary of project costs less accumulated amortization:

	Beginning Balance 6/30/2023	Additions	Disposals	Ending Balance 6/30/2024
Amortizable project costs	\$ 320,727	\$ -	\$ -	\$ 320,727
Less: accum. amortization	(265,969)	(10,691)	-	(276,660)
Net project costs	<u>\$ 54,758</u>	<u>\$ (10,691)</u>	<u>\$ -</u>	<u>\$ 44,067</u>

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 8 – LONG-TERM DEBT**

AMR at Pensacola, Inc. has loans payable with several financial institutions, the Florida Housing Finance Agency, Escambia County, Florida, and a related party. Loans payable at June 30, 2024 are summarized as follows:

A. Hancock Bank

The mortgage held by Hancock Bank had a balance of \$149,370 and \$170,475 at June 30, 2024 and 2023, respectively. Principal and interest, at a rate of 3.75%, is paid monthly. The mortgage is secured by certain rental real property of the Organization.

B. Cadence Bank

- i. Pensacola Affordables Loan: The mortgage held by Cadence Bank had a balance of \$382,148 and \$406,373 at June 30, 2024 and 2023, respectively. Principal and interest, at a fixed rate of 3.99%, is paid monthly until April 26, 2026 when the rate will change to Prime+1% through the November 26, 2035 maturity date. The mortgage is secured by certain rental real property of the Organization.
- ii. Tiny Home Loan: In October 2022, the Organization converted a line-of-credit to a loan for \$67,000. The principal balance was \$61,998 and \$65,044 as of June 30, 2024 and 2023, respectively. Principal and interest, at a fixed rate of 5.50%, is paid monthly until October 18, 2027 when the rate will change to Prime+0.5% through the October 17, 2037 maturity date. The mortgage is secured by certain rental real property of the Organization.

C. Florida Housing Finance Agency (FHFA)

- i. State Apartment Incentive Loan (SAIL): This is a 20-year mortgage note with an original principal amount of \$328,500. The principal balance outstanding is \$211,605 and \$227,532 as of June 30, 2024 and 2023, respectively. Principal and interest, at a rate of 1%, is paid monthly. The loan matures in November 2036. The mortgage is secured by certain rental real property of the corporation.
  - a. Belmont Street Housing: At the request of the loan servicer for the Florida Housing Finance Agency, a separate escrow account was established for the purpose of depositing monies for insurance premiums, real estate taxes, and funds reserved for replacements. This account is held at Cadence Bank and had a balance of \$30,926 and \$26,924 as of June 30, 2024 and 2023, respectively. The mortgage holder has placed a hold on this account so that no funds, other than interest, can be withdrawn without the consent of the Florida Housing Finance Agency and/or its servicing agent.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 8 – LONG-TERM DEBT (CONTINUED)**

C. Florida Housing Finance Agency (FHFA) (Continued)

- ii. HOME Investment Partnerships Loan (HOME): These mortgage notes totaled \$478,483 and \$508,617 as of June 30, 2024 and 2023, respectively, with zero percent (0%) interest per annum on the outstanding principal balances, provided that during any period wherein the maker is not in compliance with Rule Chapter 91-34.10, Florida Administrative Code, these mortgage notes shall bear interest at the rate of three percent (3%) per annum on the outstanding principal balances. The balloon payments will mature at various dates.
  - a. Lillian Street Housing: At the request of the loan servicer for the Florida Housing Finance Agency, a separate escrow account was established for the purpose of depositing monies for insurance premiums, real estate taxes, and funds reserved for replacements. This account is held at Cadence Bank and had a balance of \$17,755 and \$16,205 at June 30, 2024 and 2023, respectively.
  - b. Zarragossa Street Housing: At the request of the loan servicer for the Florida Housing Finance Agency, a separate escrow account was established for the purpose of depositing monies for insurance premiums, real estate taxes, and funds reserved for replacements. This account is held at Cadence Bank and had a balance of \$11,279 and \$9,643 at June 30, 2024 and 2023, respectively.

D. Escambia County, Florida

A mortgage note totaling \$110,250 and \$128,625 was outstanding at June 30, 2024 and 2023, respectively. No interest or principal is due as long as the housing is maintained for low-income rental purposes. In addition, Escambia County, Florida has agreed to forgive the annualized installment of the loan as long as the Organization continues to maintain the rental units for purposes specified above. The annualized installment forgiven was \$18,375 and \$18,375 during the years ended June 30, 2024 and 2023, respectively, and are listed as mortgage forgiveness income on the Statements of Activities and Changes in Net Assets.

E. The First Bank

AMR signed a note with The First Bank in February 2023 for \$150,465. The principal balance was \$119,487 and \$144,233 at June 30, 2024 and 2023, respectively. AMR will pay this loan in 24 principal payments of \$6,000 each and one final principal and interest payment of \$6,576.08. AMR's first principal payment was due May 10, 2023, and all subsequent principal payments are due on the same day of each quarter after that. In addition, AMR will pay regular quarterly payments of all accrued unpaid interest due as of each payment date, beginning May 10, 2023, with all subsequent interest payments to be due on the same day of each quarter after that. Borrower's final payment due May 10, 2029, will be for all principal and all accrued interest not yet paid. The note is secured by a \$75,000 CD held at the bank.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 8 – LONG-TERM DEBT (CONTINUED)**

F. Synovus Bank

AMR signed a construction loan agreement with Synovus Bank in January 2023 for \$924,912. The principal balance was \$924,912 and \$269,683 at June 30, 2024 and 2023, respectively. Interest only payments, at a rate of 5.83%, are made for 18 months followed by 66 months of principal and interest payments. The note is secured by three parcels of real estate.

G. Due to Related Party

AMR has a loan payable to the Founder with a principal balance of \$14,000 and \$26,000 as of June 30, 2024 and 2023, respectively. There is no interest charged on this loan. Payments of \$1,000 are made monthly.

H. Debt Issuance Costs

Debt issuance costs are presented as a reduction of the carrying amount of the debt rather than as an asset. Amortization of the debt issuance costs is reported as interest expense on the income statement. Unamortized debt issuance costs were \$29,378 and \$34,029 at June 30, 2024 and 2023, respectively. Debt issuance costs amortized to interest expense were \$4,651 and \$4,651 for the years ending June 30, 2024 and 2023, respectively.

I. Imputed Interest

FASB ASC 835-30 also applies to the presentation of imputed interest. If a note does not have a market rate of interest, interest must be imputed at a market rate of interest. A discount exists if the present value of the note's future cash flows is less than the face amount of the note. The discount is amortized as interest expense over the life of the note. Amortization is computed using the interest method. The discount is subtracted from the related note balance. We noted that all three loans with Florida Housing were below a market rate of interest. The loans for Zarragossa (0%), Belmont (1%), and Lillian (0%) are all below a market rate of interest. Imputed interest was calculated at 5% which is comparable to the market rate if these loans had to be refinanced with another lender. The imputed interest discount for all three loans totaled \$381,093. The amount amortized to interest expense totaled \$22,597 and \$23,648 for the years ended June 30, 2024 and 2023, respectively. The discount remaining to be amortized totaled \$217,084 as of June 30, 2024.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 8 – LONG-TERM DEBT (CONTINUED)**

The annual requirements to amortize all debts outstanding as of June 30, 2024 are as follows:

	Hancock Bank	Cadence Bank	FL Housing Finance	Escambia County, FL	The First Bank	Synovus	Due to Related Party	Totals
7/1/24-6/30/25	\$ 21,928	\$ 30,122	\$ 46,220	\$ 18,375	\$ 24,000	\$ 134,593	\$ 14,000	\$ 289,238
7/1/25-6/30/26	127,442	31,414	46,381	18,375	24,000	155,442	-	403,054
7/1/26-6/30/27	-	32,763	46,544	18,375	24,000	164,883	-	286,565
7/1/27-6/30/28	-	34,132	46,709	18,375	24,000	174,839	-	298,055
7/1/28-6/30/29	-	35,639	46,876	18,375	23,487	185,517	-	309,894
Thereafter	-	280,077	457,358	18,375	-	109,638	-	865,448
Total	<u>\$ 149,370</u>	<u>\$ 444,147</u>	<u>\$ 690,088</u>	<u>\$ 110,250</u>	<u>\$ 119,487</u>	<u>\$ 924,912</u>	<u>\$ 14,000</u>	<u>\$2,452,254</u>
								Debt issuance costs (29,378)
								Imputed interest discount (217,084)
								Less current portion (289,238)
								Notes payable, less current portion <u>\$ 1,916,554</u>

Interest expense for the years ended June 30, 2024 and 2023 totaled \$111,143 and \$60,825, respectively.

**NOTE 9 – RESIDENCY VESTING PROGRAM**

On the Belmont, Lillian, and Zarragossa projects, AMR at Pensacola, Inc. has agreed, under terms of certain financing arrangements, to participate in a home ownership program whereby AMR at Pensacola, Inc. will provide five percent (5%) of the tenant-paid net rent towards down payment assistance for a tenant purchasing a home, provided the tenant has participated in financial counseling provided free to the tenant, and the tenant remains a responsible tenant. The five percent credit is subject to the tenant paying rent on time and not violating the lease. If the tenant violates the lease, the tenant will lose credit for the month(s) so violated.

If the tenant cures the violation, the tenant can continue in the program. On the Lillian project, there is a three (3) year continuous residency-vesting period for the credit. Throughout the twenty-year history of the program, AMR has never been liable for a significant amount of rent. Therefore, as of June 30, 2024, the possible liability would be insignificant to the financial statements as a whole.

**NOTE 10 – NET ASSETS WITH DONOR RESTRICTIONS**

As of June 30, 2024, net assets with donor restrictions totaling \$54,750 were for pledges with time restrictions. See **Note 5**.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 11 – CONTRIBUTIONS OF NONFINANCIAL ASSETS**

The Organization received contributions of nonfinancial assets (in-kind contributions), recognized as revenue in the accompanying Statement of Activities and Changes in Net Assets, of the following nature:

Description	Revenue Recognized	Utilization	Valuation
In-kind furniture and equipment	\$ 9,785	Program	Valued at donor's estimated fair market value
In-kind impact fees	7,458	Program	Valued at donor's estimated fair market value
In-kind supplies	650	Program	Valued at donor's estimated fair market value
	<u>\$ 17,893</u>		

For the year ending June 30, 2024, there were no donor restrictions on in-kind contributions.

**NOTE 12 – LEASES**

AMR leases property for storage, repairs, and security of AMR's vehicles and equipment. The lease is on a year-to-year basis. Lease payments are \$18,000 per year.

AMR leases office space due to the increase in staff working on the tiny home project. The lease is on a year-to-year basis. Payments totaled \$8,403 and \$8,325 for the year ended June 30, 2024 and 2023, respectively.

**NOTE 13 – RELATED PARTIES**

For the year ended June 30, 2024, payments totaling \$906,977 were paid to a company owned by a Board member for construction costs associated with the Phoenix Project. The goal of the Phoenix Project is to develop a total of 14 tiny home communities consisting of approximately 12 homes each. AMR completed the first tiny home community in fiscal year 2024. AMR receives receipts for construction costs and pays an additional 5-10% for contractor overhead costs.

The Founder/General Counsel of AMR runs multiple businesses from one office location. Employees share their time between these businesses and document hours worked at each. Payroll reimbursement expense is paid to a company owned by this related party to reimburse for AMR's portion of payroll. This company has better benefit options than AMR which is why employees are paid through this company and then reimbursed. For the year ended June 30, 2024, payroll reimbursement expense paid to related parties totaled \$84,989.

Payroll reimbursement income is time paid through AMR that is spent on other companies owned by the Founder/General Counsel. These companies pay AMR as reimbursement. For the year ended June 30, 2024, payroll reimbursement income received from related parties totaled \$29,989.

**AMR at Pensacola, Inc.**  
Notes to the Financial Statements  
For the years ended June 30, 2024 and 2023

**NOTE 13 – RELATED PARTIES (CONTINUED)**

Other reimbursement income and expenses are paid to related party companies for reimbursements for supplies, maintenance, dues, appliances, etc. For the year ended June 30, 2024, other reimbursement income and expenses paid to related parties totaled \$160 and \$49,473, respectively.

As mentioned in **Note 8 G.**, AMR has a loan payable to the Founder/General Counsel with a principal balance of \$14,000 as of June 30, 2024. There is no interest charged on this loan. Payments of \$1,000 are made monthly.

**NOTE 14 – AVAILABILITY OF FINANCIAL ASSETS**

The following reflects the Organization’s financial assets as of June 30, 2024, reduced by amounts not available for general use because of contractual or donor-imposed restrictions within one year of the balance sheet date:

Financial assets:	
Cash	\$ 222,809
Certificates of deposit	248,977
Investments	294,271
Accounts receivable	115,275
Pledges receivable, current	<u>15,000</u>
Total financial assets	896,332
Less those unavailable for general expenditure within one year, due to:	
Cash restricted for escrow deposits	(59,960)
Donor restrictions	<u>(54,750)</u>
Financial assets available to meet cash needs for general expenditures within one year	<u><u>\$ 781,622</u></u>

As part of the Organization’s liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due.

**SUPPLEMENTARY INFORMATION**



**AMR at Pensacola, Inc.**  
**Belmont Duplexes**  
Statement of Financial Position  
As of June 30, 2024

**ASSETS**

**Current Assets**

Cash - unrestricted	\$	133,125
Cash - restricted		30,926
Total cash		164,051
Certificate of deposit		46,196
Accounts receivable		20,500
Prepaid expenses		25,321
Security deposits receivable		17,246
Total current assets		273,314

**Non-Current Assets**

Land		134,584
Buildings (rental units)		880,991
Appliances and fixtures		279,829
Accumulated depreciation		(923,640)
Utility deposits		65
Total non-current assets		371,829

<b>Total Assets</b>	<b>\$</b>	<b>645,143</b>
---------------------	-----------	----------------

**LIABILITIES & NET ASSETS**

**Current Liabilities**

Accounts payable	\$	892
Salaries and wages payable		2,284
Security deposits		18,746
Current portion of long-term debt: SAIL loan		16,087
Total current liabilities		38,009

**Long-Term Liabilities**

Note payable, less current portion: SAIL loan (Net of \$45,593 of imputed interest discount and \$5,341 of debt issuance costs)		144,585
Total long-term liabilities		144,585

<b>Total Liabilities</b>		<b>182,594</b>
--------------------------	--	----------------

**Net Assets**

Net assets without donor restrictions		462,549
---------------------------------------	--	---------

<b>Total Liabilities and Net Assets</b>	<b>\$</b>	<b>645,143</b>
---	-----------	----------------

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Belmont Duplexes**  
Statement of Activities and Changes in Net Assets  
For the year ended June 30, 2024

**Revenue**

Dwelling rental revenue	\$ 260,036
Interest income	102
Other income	3,832
Total revenue	<u>263,970</u>

**Expenses**

Administration fees	400
Depreciation and amortization	36,958
Insurance	27,997
Interest expense	9,347
Management and compliance fees	20,067
Miscellaneous	429
Payroll expenses	57,375
Professional fees	6,458
Repairs and maintenance	37,049
Taxes and licenses	3,059
Utilities	2,470
Total expenses	<u>201,609</u>

<b>Change in Net Assets</b>	62,361
<b>Net Assets - Beginning of Year</b>	400,188
<b>Net Assets - End of Year</b>	<u><u>\$ 462,549</u></u>

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Belmont Duplexes**  
Statement of Cash Flows  
For the year ended June 30, 2024

<b>Cash Flows from Operating Activities</b>	
Change in net assets	\$ 62,361
Adjustments to reconcile change in net assets to net cash from operating activities:	
Amortization of debt issuance costs	432
Depreciation and amortization	36,958
Discount amortization	6,713
Loss on disposal of assets	134
Changes in operating assets and liabilities:	
Accounts receivable	496
Prepaid expenses	(7,934)
Security deposits receivable	2,464
Accounts payable	(515)
Salaries and wages payable	1,358
Security deposits	(1,464)
Net cash from operating activities	101,003
 <b>Cash Flows from Investing Activities</b>	
Acquisition of equipment	(30,136)
Net cash from investing activities	(30,136)
 <b>Cash Flows from Financing Activities</b>	
Principal payments on long-term debt	(15,927)
Net cash from financing activities	(15,927)
<b>Net Change in Cash</b>	54,940
<b>Cash - Beginning of Year</b>	109,111
<b>Cash - End of Year</b>	\$ 164,051

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Lillian Elderly**  
Statement of Financial Position  
As of June 30, 2024

**ASSETS**

**Current Assets**

Cash - restricted	\$	17,755
Certificate of deposit		119,873
Accounts receivable		6,236
Prepaid insurance		10,116
Security deposits receivable		9,675
Total current assets		163,655

**Non-Current Assets**

Land		40,000
Buildings (rental units)		271,871
Appliances and fixtures		122,208
Accumulated depreciation		(298,067)
Amortizable project costs		152,741
Accumulated amortization		(128,345)
Total non-current assets		160,408

<b>Total Assets</b>	<b>\$</b>	<b>324,063</b>
---------------------	-----------	----------------

**LIABILITIES & NET ASSETS**

**Current Liabilities**

Accounts payable	\$	2,074
Due to AMR operating		150,466
Salaries and wages payable		966
Security deposits		9,675
Current portion of long-term debt: HOME loan		14,233
Total current liabilities		177,414

**Long-Term Liabilities**

Note payable, less current portion: HOME Loan (Net of \$145,201 of imputed interest discount and \$4,257 of debt issuance costs)		181,467
Total long-term liabilities		181,467

<b>Total Liabilities</b>		<b>358,881</b>
--------------------------	--	----------------

**Net Assets**

Net asset deficit		(34,818)
Total net assets		(34,818)

<b>Total Liabilities and Net Assets</b>	<b>\$</b>	<b>324,063</b>
---	-----------	----------------

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Lillian Elderly**  
Statement of Activities and Changes in Net Assets  
For the year ended June 30, 2024

**Revenue**

Dwelling rental revenue	\$ 87,522
Interest income	59
Other income	275
Total revenue	<u>87,856</u>

**Expenses**

Administration fees	400
Depreciation and amortization	6,037
Insurance	11,632
Interest expense	10,207
Management and compliance fees	7,002
Payroll expenses	21,890
Professional fees	2,238
Repairs and maintenance	13,824
Taxes and licenses	2,423
Utilities	8,435
Total expenses	<u>84,088</u>

<b>Change in Net Assets</b>	3,768
<b>Net Assets - Beginning of Year</b>	<u>(38,586)</u>
<b>Net Assets - End of Year</b>	<u><u>\$ (34,818)</u></u>

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Lillian Elderly**  
Statement of Cash Flows  
For the year ended June 30, 2024

<b>Cash Flows from Operating Activities</b>	
Change in net assets	\$ 3,768
Adjustments to reconcile change in net assets to net cash from operating activities:	
Amortization of debt issuance costs	177
Depreciation and amortization	6,037
Discount amortization	10,030
Changes in operating assets and liabilities:	
Accounts receivable	(1,571)
Prepaid insurance	(3,292)
Security deposits receivable	(2,591)
Accounts payable	(1,059)
Due to AMR operating	5,720
Salaries and wages payable	673
Security deposits	2,591
Net cash from operating activities	20,483
 <b>Cash Flows from Investing Activities</b>	
Acquisition of equipment	(4,700)
Net cash from investing activities	(4,700)
 <b>Cash Flows from Financing Activities</b>	
Principal payments on long-term debt	(14,233)
Net cash from financing activities	(14,233)
 <b>Net Change in Cash</b>	 1,550
<b>Cash - Beginning of Year</b>	<b>16,205</b>
<b>Cash - End of Year</b>	<b>\$ 17,755</b>

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Zarragossa Street**  
Statement of Financial Position  
As of June 30, 2024

**ASSETS**

**Current Assets**

Cash - restricted	\$	11,280
Certificate of deposit		40,440
Accounts receivable		5,671
Prepaid insurance		2,654
Security deposits receivable		4,110
Total current assets		64,155

**Non-Current Assets**

Land		40,000
Buildings (rental units)		244,063
Appliances and fixtures		88,778
Accumulated depreciation		(263,398)
Amortizable project costs		103,461
Accumulated amortization		(91,419)
Total non-current assets		121,485

<b>Total Assets</b>	<b>\$</b>	<b>185,640</b>
---------------------	-----------	----------------

**LIABILITIES & NET ASSETS**

**Current Liabilities**

Accounts payable	\$	1,501
Due to AMR operating		30,332
Salaries and wages payable		702
Security deposits		4,110
Current portion of long-term debt: HOME loan		15,900
Total current liabilities		52,545

**Long-Term Liabilities**

Note payable, less current portion: HOME loan (Net of \$26,290 of imputed interest discount and \$3,051 of debt issuance costs)		88,084
Total long-term liabilities		88,084

<b>Total Liabilities</b>		<b>140,629</b>
--------------------------	--	----------------

**Net Assets**

Net assets without donor restrictions		45,011
Total net assets		45,011

<b>Total Liabilities and Net Assets</b>	<b>\$</b>	<b>185,640</b>
---	-----------	----------------

See auditor's report on supplementary information.

**AMR at Pensacola, Inc.**  
**Zarragossa Street**  
Statement of Activities and Changes in Net Assets  
For the year ended June 30, 2024

<b>Revenue</b>	
Dwelling rental revenue	\$ 74,235
Interest income	37
Other income	433
Total revenue	<u>74,705</u>
<b>Expenses</b>	
Administration fees	800
Depreciation and amortization	11,366
Insurance	6,155
Interest expense	6,215
Management and compliance fees	5,939
Miscellaneous	27
Payroll expenses	17,637
Professional fees	2,005
Repairs and maintenance	10,412
Taxes and licenses	760
Total expenses	<u>61,316</u>
<b>Change in Net Assets</b>	13,389
<b>Net Assets - Beginning of Year</b>	<u>31,622</u>
<b>Net Assets - End of Year</b>	<u><u>\$ 45,011</u></u>

See auditor's report on supplementary information.



**AMR at Pensacola, Inc.**  
**Zarragossa Street**  
Statement of Cash Flows  
For the year ended June 30, 2024

<b>Cash Flows from Operating Activities</b>	
Change in net assets	\$ 13,389
Adjustments to reconcile change in net assets to net cash from operating activities:	
Amortization of debt issuance costs	361
Depreciation and amortization	11,366
Discount amortization	5,854
Changes in operating assets and liabilities:	
Accounts receivable	2,067
Prepaid insurance	(763)
Security deposits receivable	1,600
Accounts payable	160
Due to AMR operating	(15,257)
Salaries and wages payable	360
Security deposits	(1,600)
Net cash from operating activities	17,537
 <b>Cash Flows from Financing Activities</b>	
Principal payments on long-term debt	(15,900)
Net cash from financing activities	(15,900)
 <b>Net Change in Cash</b>	
	1,637
<b>Cash - Beginning of Year</b>	9,643
<b>Cash - End of Year</b>	\$ 11,280

See auditor's report on supplementary information.

**KURBEC & CANTIN CPA PA**  
**913 GULF BREEZE PARKWAY, STE 14**  
**GULF BREEZE, FL 32561**  
**(850) 934-3730**  
**INFO@canticpa.com**

December 4, 2024

AMR AT PENSACOLA INC  
730 BAYFRONT PKWY, #4B  
PENSACOLA, FL 32502

Dear Client,

Enclosed is the 2022 U.S. Form 990, Return of Organization Exempt from Income Tax, for AMR AT PENSACOLA INC for the tax year ending June 30, 2023.

Your 2022 U.S. Form 990, Return of Organization Exempt from Income Tax, return will be electronically filed.

We very much appreciate the opportunity to serve you. If you have any questions regarding this return, please do not hesitate to call.

Sincerely,

Joseph Kurbec

KURBEC & CANTIN CPA PA  
913 GULF BREEZE PARKWAY, STE 14  
GULF BREEZE, FL 32561

December 4, 2024

AMR AT PENSACOLA INC  
730 BAYFRONT PKWY, #4B  
PENSACOLA, FL 32502

RE: Our Privacy Policy, Compliance with the Gramm-Leach-Bliley Act, Public Law  
106-102 (FTC 16 CFR Part 313)

Dear Client,

The privacy of your client information has always been important to us, and we have always been bound by professional standards of confidentiality. However, we are now required by law to formally inform you of our privacy policy.

We collect nonpublic personal information about you that is provided by you or obtained by us with your authorization. This information may come from various sources, including information we receive from personal interviews, tax organizers, worksheets and other documents necessary to provide professional services to you.

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as permitted or required by law, or when necessary to process transactions requested by a client.

We restrict access to nonpublic personal information about you to members of our firm who need to know that information in order to provide you professional services. We retain records relating to the professional services that we provide you in accordance with accounting and government standards.

We employ physical, electronic, and procedural security safeguards to protect your nonpublic personal information.

Your confidence and trust are important to us. If you have any questions or concerns regarding the privacy of your nonpublic personal information, please contact us.

Sincerely,

Joseph Kurbec

**2022 Exempt Organization Business Tax Return**  
prepared by:

**KURBEC & CANTIN CPA PA**  
913 GULF BREEZE PARKWAY, STE 14  
GULF BREEZE, FL 32561

**AMR AT PENSACOLA INC**  
730 BAYFRONT PKWY, #4B  
PENSACOLA, FL 32502

AMR AT PENSACOLA INC  
730 BAYFRONT PKWY, #4B  
PENSACOLA, FL 32502

Return of Organization Exempt From Income Tax

2022

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

Header section containing organization details: AMR AT PENSACOLA INC, EIN 59-2940706, address 730 BAYFRONT PKWY, PENSACOLA, FL 32502, and principal officer KEVIN HAGEN.

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Includes rows for mission statement, governance, revenue (Total: 1,678,294), expenses (Total: 1,005,576), and net assets (Total: 2,756,464).

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of officer section: KEVIN HAGEN, PRESIDENT, dated 12/07/2023.

Paid Preparer Use Only section: Joseph Kurbec, KURBEC & CANTIN CPA PA, dated 12/07/2023.

May the IRS discuss this return with the preparer shown above? See instructions. [X] Yes [ ] No

**Part 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:

OPERATION OF LOW INCOME HOUSING  
PENSACOLA HOUSING AGENCY

**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  No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  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 \$ 781,143. including grants of \$ 0. ) (Revenue \$ 1,261,510. )

OPERATION OF LOW INCOME HOUSING  
ADMINISTERED BY THE CITY OF PENSACOLA HOUSING AGENCY

**4b** (Code: ) (Expenses \$ including grants of \$ ) (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 781,143.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A . . . . .</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions . . . . .	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I . . . . .</i>		X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II . . . . .</i>		X
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III . . . . .</i>		X
<b>6</b> 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 "Yes," complete Schedule D, Part I . . . . .</i>		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II . . . . .</i>		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III . . . . .</i>		X
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV . . . . .</i>		X
<b>10</b> 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>		X
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI . . . . .</i>	<b>11a</b> X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII . . . . .</i>		X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII . . . . .</i>		X
<b>d</b> 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 "Yes," complete Schedule D, Part IX . . . . .</i>		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X . . . . .</i>		X
<b>f</b> 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 "Yes," complete Schedule D, Part X . . . . .</i>		X
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII . . . . .</i>	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . .</i>		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E . . . . .</i>		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		X
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV. . . . .</i>		X
<b>15</b> 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 "Yes," complete Schedule F, Parts II and IV . . . . .</i>		X
<b>16</b> 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 "Yes," complete Schedule F, Parts III and IV. . . . .</i>		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions . . . . .</i>		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II . . . . .</i>		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III . . . . .</i>		X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H . . . . .</i>		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>		X



**Part IV Checklist of Required Schedules** *(continued)*

	Yes	No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	<b>22</b>	X
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> . . . . .	<b>23</b>	X
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	<b>24d</b>	
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25a</b>	X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25b</b>	X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	<b>27</b>	X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28a</b>	X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28b</b>	X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	<b>34</b>	X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	<b>35a</b>	X
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>35b</b>	
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>36</b>	X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O . . . . .	<b>38</b>	X

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable . . . . .	<b>1a</b>	14
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . . . . .	<b>1b</b>	0
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b>	

<b>Part V Statements Regarding Other IRS Filings and Tax Compliance</b> <i>(continued)</i>		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b>	0
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	<b>3b</b>	
<b>4a</b>	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)?	<b>4a</b>	X
<b>b</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).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>	
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>	X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>	X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>	
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</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	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	<b>14b</b>	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	<b>15</b>	
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	<b>17</b>	

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included on line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done.; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[ ] Own website [ ] Another's website [ ] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records.
JIM REEVES, 730 BAYFRONT PKWY STE 4B, PENSACOLA, FL 32502 (850)438-4400

**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.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KEVIN HAGEN PRESIDENT	0.50	X		X				1,000.	0.	0.
(2) DANNY ZIMMERN VICE PRESIDENT	0.00	X		X				0.	0.	0.
(3) ALICIA CHRISTY SECRETARY/TREASURER	0.00	X		X				750.	0.	0.
(4) HAL GEORGE MEMBER	0.00	X						750.	0.	0.
(5) VICTOR BINDI MEMBER	0.00	X						750.	0.	0.
(6) JAMES WARWICK MEMBER	0.00	X						1,000.	0.	0.
(7) CEDRIC ALEXANDER MEMBER	0.00	X						0.	0.	0.
(8) GUS ALLEN MEMBER	0.00	X						0.	0.	0.
(9) KATIN DAVIS MEMBER	0.00	X						0.	0.	0.
(10)										
(11)										
(12)										
(13)										
(14)										

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
<b>1b Subtotal</b>							4,250.	0.	0.	
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>							4,250.	0.	0.	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

**Part VIII Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants, and Other Similar Amounts</b>	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b>					
	<b>b</b>	Membership dues . . . . .	<b>1b</b>					
	<b>c</b>	Fundraising events . . . . .	<b>1c</b>					
	<b>d</b>	Related organizations . . . . .	<b>1d</b>					
	<b>e</b>	Government grants (contributions)	<b>1e</b>	18,375.				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	383,393.				
	<b>g</b>	Noncash contributions included in lines 1a-1f . . . . .	<b>1g</b>	\$				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .		401,768.				
	<b>Program Service Revenue</b>	<b>2a</b>	RENTS COLLECTED	Business Code 531110	1,261,510.	1,261,510.	0.	0.
<b>b</b>		OTHER RENTAL INCOME	531110	4,878.	4,878.	0.	0.	
<b>c</b>								
<b>d</b>								
<b>e</b>								
<b>f</b>		All other program service revenue . .						
<b>g</b>		<b>Total.</b> Add lines 2a-2f . . . . .		1,266,388.				
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . .		5,410.	0.	0.	5,410.	
	<b>4</b>	Income from investment of tax-exempt bond proceeds						
	<b>5</b>	Royalties . . . . .						
	<b>6a</b>	Gross rents . . . . .	<b>6a</b>	(i) Real				
				(ii) Personal				
	<b>b</b>	Less: rental expenses	<b>6b</b>					
	<b>c</b>	Rental income or (loss)	<b>6c</b>					
	<b>d</b>	Net rental income or (loss) . . . . .						
	<b>7a</b>	Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
				(ii) Other		0.		
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .	<b>7b</b>		1,483.			
	<b>c</b>	Gain or (loss) . . . . .	<b>7c</b>		-1,483.			
	<b>d</b>	Net gain or (loss) . . . . .		-1,483.	-1,483.	0.	0.	
<b>8a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>8a</b>						
<b>b</b>	Less: direct expenses . . . . .	<b>8b</b>						
<b>c</b>	Net income or (loss) from fundraising events . . . . .							
<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>9a</b>						
			<b>9b</b>					
<b>c</b>	Net income or (loss) from gaming activities . . . . .							
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>10a</b>						
			<b>10b</b>					
<b>c</b>	Net income or (loss) from sales of inventory . . . . .							
<b>Miscellaneous Revenue</b>	<b>11a</b>	INSURANCE PROCEEDS	Business Code 999999	6,578.	6,578.	0.	0.	
	<b>b</b>	NET INVESTMENT RETURN	999999	-412.	0.	0.	-412.	
	<b>c</b>	ADMIN FEE INCOME	999999	45.	45.	0.	0.	
	<b>d</b>	All other revenue . . . . .						
	<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .		6,211.				
<b>12</b>	<b>Total revenue.</b> See instructions . . . . .		1,678,294.	1,271,528.	0.	4,998.		

**Part IX Statement of Functional Expenses**

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

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

**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	5,000.	0.	5,000.	0.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	108,981.	59,940.	49,041.	0.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits				
<b>10</b> Payroll taxes	8,624.	4,743.	3,881.	0.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management	194,706.	153,321.	41,385.	0.
<b>b</b> Legal	2,480.	0.	2,480.	0.
<b>c</b> Accounting	30,949.	0.	30,949.	0.
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)				
<b>12</b> Advertising and promotion				
<b>13</b> Office expenses	10,784.	0.	10,784.	0.
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	76,609.	36,093.	40,516.	0.
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials	1,241.	0.	1,241.	0.
<b>19</b> Conferences, conventions, and meetings	3,357.	0.	3,357.	0.
<b>20</b> Interest	60,825.	60,825.	0.	0.
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	199,194.	194,828.	4,366.	0.
<b>23</b> Insurance	122,034.	119,489.	2,545.	0.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> APPLIANCE EXPENSE	2,915.	2,915.	0.	0.
<b>b</b> BACKGROUND CHECKS	208.	0.	208.	0.
<b>c</b> BANK FEES	1,795.	0.	1,795.	0.
<b>d</b> LICENSES & TAXES	14,372.	14,256.	116.	0.
<b>e</b> All other expenses	161,502.	134,733.	26,769.	0.
<b>25</b> Total functional expenses. Add lines 1 through 24e	1,005,576.	781,143.	224,433.	0.
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	207,230.	<b>1</b>	436,464.
	<b>2</b> Savings and temporary cash investments . . . . .	236,526.	<b>2</b>	322,031.
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	176,041.	<b>4</b>	204,267.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	88,782.	<b>9</b>	90,383.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b> 6,115,885.		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 2,681,985.	2,821,054.	<b>10c</b> 3,433,900.
	<b>11</b> Investments—publicly traded securities . . . . .		<b>11</b>	
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .	65,449.	<b>14</b>	54,758.
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	1.	<b>15</b>	1.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) . . . . .		3,595,083.	<b>16</b>	4,541,804.
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	45,224.	<b>17</b>	9,727.
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .	38,000.	<b>22</b>	26,000.
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	1,336,904.	<b>23</b>	1,646,870.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	91,212.	<b>24</b>	102,743.
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D . . . . .		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .		1,511,340.	<b>26</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .		<b>27</b>	
	<b>28</b> Net assets with donor restrictions . . . . .		<b>28</b>	
	<b>Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds . . . . .	2,083,743.	<b>31</b>	2,756,464.
<b>32</b> Total net assets or fund balances . . . . .		2,083,743.	<b>32</b>	2,756,464.
<b>33</b> Total liabilities and net assets/fund balances . . . . .		3,595,083.	<b>33</b>	4,541,804.



**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	1,678,294.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	1,005,576.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	672,718.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	2,083,743.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	3.
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	2,756,464.

**Part XII Financial Statements and Reporting**

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

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . . If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . . If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
<b>3a</b> 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? . . . . .		X
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .		

**SCHEDULE A  
(Form 990)**

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2022**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/Form990) for instructions and the latest information.

<b>Name of the organization</b> AMR AT PENSACOLA INC	<b>Employer identification number</b> 59-2940706
---	---

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vii)**. (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10  An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4 Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> 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) . . . . .						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>7</b> Amounts from line 4 . . . . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) . . . . .	<b>14</b>	%
<b>15</b> Public support percentage from 2021 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a 33 1/3% support test—2022.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 33 1/3% support test—2021.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a 10%-facts-and-circumstances test—2022.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 10%-facts-and-circumstances test—2021.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		<input type="checkbox"/>

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	40,134.	35,239.	87,438.	30,284.	401,768.	594,863.
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . .	874,413.	966,883.	1,045,474.	1,163,512.	1,274,008.	5,324,290.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . .	914,547.	1,002,122.	1,132,912.	1,193,796.	1,675,776.	5,919,153.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . .						5,919,153.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>9</b> Amounts from line 6 . . . .	914,547.	1,002,122.	1,132,912.	1,193,796.	1,675,776.	5,919,153.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . .	3,893.	4,429.	3,969.	951.	4,998.	18,240.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . .						
<b>c</b> Add lines 10a and 10b . . . .	3,893.	4,429.	3,969.	951.	4,998.	18,240.
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . .	918,440.	1,006,551.	1,136,881.	1,194,747.	1,680,774.	5,937,393.
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) . . . .	<b>15</b>	99.69 %
<b>16</b> Public support percentage from 2021 Schedule A, Part III, line 15 . . . .	<b>16</b>	99.72 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2022</b> (line 10c, column (f), divided by line 13, column (f)) . . . .	<b>17</b>	0.31 %
<b>18</b> Investment income percentage from <b>2021</b> Schedule A, Part III, line 17 . . . .	<b>18</b>	0.28 %
<b>19a 33 1/3% support tests—2022.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . .	<input checked="" type="checkbox"/>	
<b>b 33 1/3% support tests—2021.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . .	<input type="checkbox"/>	
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . .	<input type="checkbox"/>	

**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**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
3b	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
4c	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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
5b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5c	<b>Substitutions only.</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
9b	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? <i>If "Yes," provide detail in Part VI.</i>		
9c	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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>11a</b>		
<b>b</b> A family member of a person described on line 11a above?		
<b>11b</b>		
<b>c</b> 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 <b>Part VI</b> .		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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.		
<b>1</b>		
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> 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 <b>Part VI</b> 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.	Yes	No
<b>2a</b>		
<b>b</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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> 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 <b>Part VI</b> .		
<b>3a</b>		
<b>b</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 <b>Part VI</b> the role played by the organization in this regard.		
<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1**  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A—Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3.	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	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)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>	
<b>Section B—Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
<b>2</b>	Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by 0.035.	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C—Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>	
<b>2</b>	Enter 0.85 of line 1.	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3.	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

<b>Section D—Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required—provide details in <b>Part VI</b> )	<b>5</b>
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2022 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E—Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2022</b>	<b>(iii) Distributable Amount for 2022</b>
<b>1</b> Distributable amount for 2022 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2022 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2022			
<b>a</b> From 2017 . . . . .			
<b>b</b> From 2018 . . . . .			
<b>c</b> From 2019 . . . . .			
<b>d</b> From 2020 . . . . .			
<b>e</b> From 2021 . . . . .			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2022 distributable amount			
<b>i</b> Carryover from 2017 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2022 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2022 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2023.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2018 . . . . .			
<b>b</b> Excess from 2019 . . . . .			
<b>c</b> Excess from 2020 . . . . .			
<b>d</b> Excess from 2021 . . . . .			
<b>e</b> Excess from 2022 . . . . .			





Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

AMR AT PENSACOLA INC

Employer identification number

59-2940706

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)( 3 ) (enter number) organization

[ ] 4947(a)(1) nonexempt charitable trust not 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

- [X] 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

- [ ] 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 . . . . . \$ \_\_\_\_\_

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).

Name of organization AMR AT PENSACOLA INC	Employer identification number 59-2940706
--	--

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROSS & MARCI GOODMAN 705 PORT ROYAL WAY PENSACOLA FL 32502	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	SHIRLEY CRONLEY 1201 East Gadsden St Pensacola FL 32501	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	SYNOVUS BANK PO BOX 120 COLUMBUS GA 31901	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>AMR AT PENSACOLA INC</b>	<b>Employer identification number</b> 59-2940706
---	---

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

<b>(a) No. from Part I</b>	<b>(b) Description of noncash property given</b>	<b>(c) FMV (or estimate) (See instructions.)</b>	<b>(d) Date received</b>
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----
-----	----- ----- ----- -----	\$-----	-----

Name of organization <b>AMR AT PENSACOLA INC</b>	Employer identification number <b>59-2940706</b>
---	---

**Part III** **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: AMR AT PENSACOLA INC; Employer identification number: 59-2940706

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form for Part II Conservation Easements. Includes questions about purpose of easements, total number and acreage, and monitoring expenses. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, and 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting works of art and historical treasures, and a table for revenue and assets.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

**3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange program
- e**  Other .....

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  **Yes**  **No**

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  **Yes**  **No**

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
<b>1c</b> Beginning balance	
<b>1d</b> Additions during the year	
<b>1e</b> Distributions during the year	
<b>1f</b> Ending balance	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  **Yes**  **No**

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance					
<b>b</b> Contributions					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> End of year balance					

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment \_\_\_\_\_%
- b** Permanent endowment \_\_\_\_\_%
- c** Term endowment \_\_\_\_\_%

The percentages on lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations
- (ii)** Related organizations

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

**b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land	730,513.			730,513.
<b>b</b> Buildings	4,277,384.		2,403,685.	1,873,699.
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		1,107,988.	278,300.	829,688.
<b>e</b> Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				3,433,900.

**Part VII Investments—Other Securities.**

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) _____		
<b>Total.</b> (Column (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-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) . . . . .		

**Part IX Other Assets.**

Complete if the organization answered “Yes” on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) . . . . .	

**Part X Other Liabilities.**

Complete if the organization answered “Yes” on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 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 .



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	1,682,846.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>		
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	4,552.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	4,552.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	1,678,294.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .		<b>5</b>	1,678,294.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	1,014,374.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	8,798.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	8,798.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	1,005,576.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .		<b>5</b>	1,005,576.

**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.

Pt XII, Line 2d: EXPENSES ARE REPORTED IN CASH ON TAX RETURN BUT ACCRUAL ON AUDIT. THIS IS THE DIFFERENCE BETWEEN THE EXPENSE NUMBERS

Pt XI, Line 2d: INCOME IS REPORTED IN CASH ON TAX RETURN BUT ACCRUAL ON AUDIT. THIS IS THE DIFFERENCE BETWEEN THE INCOME NUMBERS



**SCHEDULE L  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open To Public Inspection**

Name of the organization <b>AMR AT PENSACOLA INC</b>	Employer identification number <b>59-2940706</b>
---	---

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2	Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958	\$	
3	Enter the amount of tax, if any, on line 2, above, reimbursed by the organization	\$	

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1) JAMES J REEVES	FOUNDING MEMBER	CASH	X		40,000.	26,000.		X	X			X
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
<b>Total</b>						\$ 26,000.						

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990) 2022



**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

Name of the organization

AMR AT PENSACOLA INC

Employer identification number

59-2940706

Pt VI, Line 11b: A copy of the 990 is sent to each director and officer before  
it is filed.

Pt VI, Line 12c: Are asked annually if they have any conflicts of interest.

Pt XI: PREVIOUS \$40,000 ADDITIONAL PAID IN CAPITAL WAS ADJUSTED TO BE A LOAN

PAYABLE

Pt IX, Line 24e:

Description: CONTRACTS & REPAIRS

Total: \$39,759

Program services: \$39,759

Management and general: \$0

Fundraising: \$0

Description: MAINTENANCE

Total: \$57,398

Program services: \$57,398

Management and general: \$0

Fundraising: \$0

Description: TOOLS

Total: \$1,564

Program services: \$414

Management and general: \$1,150

Fundraising: \$0

Description: DEPRECIATION ADJUSTMENT

Total: -\$41,450

Program services: -\$41,450

Management and general: \$0

Name of the organization AMR AT PENSACOLA INC	Employer identification number 59-2940706
--	--

Fundraising: \$0

Description: REPAIRS

Total: \$65

Program services: \$0

Management and general: \$65

Fundraising: \$0

Description: BUSINESS EXPENSES:FEES

Total: \$5,191

Program services: \$1,174

Management and general: \$4,017

Fundraising: \$0

Description: LEASED EMPLOYEE EXP

Total: \$3,089

Program services: \$1,759

Management and general: \$1,330

Fundraising: \$0

Description: LANDSCAPING

Total: \$47,411

Program services: \$47,411

Management and general: \$0

Fundraising: \$0

Description: CLEANING

Total: \$3,113

Program services: \$0

Management and general: \$3,113

Fundraising: \$0

Description: TERMITE AND PEST

Name of the organization AMR AT PENSACOLA INC	Employer identification number 59-2940706
--	--

Total: \$3,534

Program services: \$3,534

Management and general: \$0

Fundraising: \$0

Description: CONTRACT SERVICES

Total: \$21,112

Program services: \$21,112

Management and general: \$0

Fundraising: \$0

Description: FUEL

Total: \$3,288

Program services: \$40

Management and general: \$3,248

Fundraising: \$0

Description: JANITORIAL FEE

Total: \$4,630

Program services: \$0

Management and general: \$4,630

Fundraising: \$0

Description: DUES & SUBSCRIPTIONS

Total: \$5,492

Program services: \$0

Management and general: \$5,492

Fundraising: \$0

Description: MISC

Total: \$31

Program services: \$0

Name of the organization

Employer identification number

AMR AT PENSACOLA INC

59-2940706

Management and general: \$31

Fundraising: \$0

Description: COMPLIANCE

Total: \$3,582

Program services: \$3,582

Management and general: \$0

Fundraising: \$0

Description: BUSINESS EXPENSES:OTHER

Total: \$465

Program services: \$0

Management and general: \$465

Fundraising: \$0

Description: OTHER EXPENSES

Total: \$678

Program services: \$0

Management and general: \$678

Fundraising: \$0

Description: DONATIONS

Total: \$2,550

Program services: \$0

Management and general: \$2,550

Fundraising: \$0



# IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning Jul 1, 2022, and ending Jun 30, 2023

# 2022

Department of the Treasury  
Internal Revenue Service

**Do not send to the IRS. Keep for your records.**  
Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.

Name of filer <b>AMR AT PENSACOLA INC</b>	EIN or SSN <b>59-2940706</b>
Name and title of officer or person subject to tax <b>KEVIN HAGEN, PRESIDENT</b>	

### Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

<b>1a</b> Form 990 check here <input checked="" type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990, Part VIII, column (A), line 12)	<b>1b</b> <u>1,678,294.</u>
<b>2a</b> Form 990-EZ check here <input type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990-EZ, line 9)	<b>2b</b> _____
<b>3a</b> Form 1120-POL check here <input type="checkbox"/>	<b>b</b> Total tax (Form 1120-POL, line 22)	<b>3b</b> _____
<b>4a</b> Form 990-PF check here <input type="checkbox"/>	<b>b</b> Tax based on investment income (Form 990-PF, Part V, line 5)	<b>4b</b> _____
<b>5a</b> Form 8868 check here <input type="checkbox"/>	<b>b</b> Balance due (Form 8868, line 3c)	<b>5b</b> _____
<b>6a</b> Form 990-T check here <input type="checkbox"/>	<b>b</b> Total tax (Form 990-T, Part III, line 4)	<b>6b</b> _____
<b>7a</b> Form 4720 check here <input type="checkbox"/>	<b>b</b> Total tax (Form 4720, Part III, line 1)	<b>7b</b> _____
<b>8a</b> Form 5227 check here <input type="checkbox"/>	<b>b</b> FMV of assets at end of tax year (Form 5227, Item D)	<b>8b</b> _____
<b>9a</b> Form 5330 check here <input type="checkbox"/>	<b>b</b> Tax due (Form 5330, Part II, line 19)	<b>9b</b> _____
<b>10a</b> Form 8038-CP check here <input type="checkbox"/>	<b>b</b> Amount of credit payment requested (Form 8038-CP, Part III, line 22)	<b>10b</b> _____

### Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that  I am an officer of the above entity or  I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

#### PIN: check one box only

I authorize KURBEC & CANTIN CPA PA to enter my PIN 

3	2	5	0	2
---	---	---	---	---

 as my signature  
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax \_\_\_\_\_ Date 12/07/2023

### Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

5	9	4	2	9	8	2	2	2	2	2
---	---	---	---	---	---	---	---	---	---	---

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature \_\_\_\_\_ Date 12/07/2023

**ERO Must Retain This Form – See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**



**KURBEC & CANTIN CPA PA**  
**913 GULF BREEZE PARKWAY, STE 14**  
**GULF BREEZE, FL 32561**  
**(850) 934-3730**  
**info@cantincpa.com**

November 25, 2024

AMR AT PENSACOLA INC  
730 BAYFRONT PKWY, #4B  
PENSACOLA, FL 32502

Dear Client,

Enclosed is the 2023 U.S. Form 990, Return of Organization Exempt from Income Tax, for AMR AT PENSACOLA INC for the tax year ending June 30, 2024.

Your 2023 U.S. Form 990, Return of Organization Exempt from Income Tax, return will be electronically filed.

We very much appreciate the opportunity to serve you. If you have any questions regarding this return, please do not hesitate to call.

Sincerely,

Joseph Kurbec

KURBEC & CANTIN CPA PA  
913 GULF BREEZE PARKWAY, STE 14  
GULF BREEZE, FL 32561

November 25, 2024

AMR AT PENSACOLA INC  
730 BAYFRONT PKWY, #4B  
PENSACOLA, FL 32502

RE: Our Privacy Policy, Compliance with the Gramm-Leach-Bliley Act, Public Law  
106-102 (FTC 16 CFR Part 313)

Dear Client,

The privacy of your client information has always been important to us, and we have always been bound by professional standards of confidentiality. However, we are now required by law to formally inform you of our privacy policy.

We collect nonpublic personal information about you that is provided by you or obtained by us with your authorization. This information may come from various sources, including information we receive from personal interviews, tax organizers, worksheets and other documents necessary to provide professional services to you.

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as permitted or required by law, or when necessary to process transactions requested by a client.

We restrict access to nonpublic personal information about you to members of our firm who need to know that information in order to provide you professional services. We retain records relating to the professional services that we provide you in accordance with accounting and government standards.

We employ physical, electronic, and procedural security safeguards to protect your nonpublic personal information.

Your confidence and trust are important to us. If you have any questions or concerns regarding the privacy of your nonpublic personal information, please contact us.

Sincerely,

Joseph Kurbec

**2023 Exempt Organization Business Tax Return**  
prepared by:

**KURBEC & CANTIN CPA PA**  
913 GULF BREEZE PARKWAY, STE 14  
GULF BREEZE, FL 32561

**AMR AT PENSACOLA INC**  
730 BAYFRONT PKWY, #4B  
PENSACOLA, FL 32502

Return of Organization Exempt From Income Tax

2023

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

Header section containing organization details: AMR AT PENSACOLA INC, EIN 59-2940706, address 730 BAYFRONT PKWY, PENSACOLA, FL 32502, and principal officer KEVIN HAGEN.

Part I Summary

Summary table with columns for Activities & Governance, Revenue, Expenses, and Net Assets or Fund Balances. Includes rows for mission statement, revenue breakdown, and total assets.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of officer section: KEVIN HAGEN, PRESIDENT, dated 11/25/2024.

Paid Preparer Use Only section: Joseph Kurbec, KURBEC & CANTIN CPA PA, dated 11/25/2024.

May the IRS discuss this return with the preparer shown above? See instructions. [X] Yes [ ] No

**Part 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:  
OPERATION OF LOW INCOME HOUSING

**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  No  
If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  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 \$ 976,108. including grants of \$ 0. ) (Revenue \$ 1,383,486. )  
OPERATION OF LOW INCOME HOUSING  
ADMINISTERED BY THE CITY OF PENSACOLA HOUSING AGENCY

**4b** (Code: ) (Expenses \$ including grants of \$ ) (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 976,108.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A . . . . .</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors? See instructions . . . . .	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I . . . . .</i>		X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II . . . . .</i>		X
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III . . . . .</i>		X
<b>6</b> 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 "Yes," complete Schedule D, Part I . . . . .</i>		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II . . . . .</i>		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III . . . . .</i>		X
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV . . . . .</i>		X
<b>10</b> 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>		X
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI . . . . .</i>	<b>11a</b> X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII . . . . .</i>		X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII . . . . .</i>		X
<b>d</b> 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 "Yes," complete Schedule D, Part IX . . . . .</i>		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X . . . . .</i>		X
<b>f</b> 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 "Yes," complete Schedule D, Part X . . . . .</i>		X
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII . . . . .</i>	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . .</i>		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E . . . . .</i>		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		X
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV . . . . .</i>		X
<b>15</b> 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 "Yes," complete Schedule F, Parts II and IV . . . . .</i>		X
<b>16</b> 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 "Yes," complete Schedule F, Parts III and IV . . . . .</i>		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions . . . . .</i>		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II . . . . .</i>		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III . . . . .</i>		X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H . . . . .</i>		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>		X



**Part IV Checklist of Required Schedules** *(continued)*

		Yes	No
<b>22</b>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
<b>23</b>	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? <i>If "Yes," complete Schedule J</i>		X
<b>24a</b>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
<b>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b>	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b>	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
<b>b</b>	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
<b>26</b>	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	X	
<b>27</b>	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
<b>28</b>	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).		
<b>a</b>	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>b</b>	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>c</b>	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	X	
<b>29</b>	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>		X
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
<b>37</b>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
<b>38</b>	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1a</b>	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
<b>b</b>	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax shelter transactions, contributions, and organizational compliance.

**Part VI Governance, Management, and Disclosure.** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	<b>1a</b> 9		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent . . . . .		
	<b>1b</b> 9		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .		x
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . . . . .		x
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		x
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		x
<b>6</b>	Did the organization have members or stockholders? . . . . .		x
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .		x
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .		x
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body? . . . . .	x	
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	x	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . .		x

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates? . . . . .		x
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	x	
<b>b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990. . . . .		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	x	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	x	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done . . . . .	x	
<b>13</b>	Did the organization have a written whistleblower policy? . . . . .	x	
<b>14</b>	Did the organization have a written document retention and destruction policy? . . . . .	x	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official . . . . .		x
<b>b</b>	Other officers or key employees of the organization . . . . .		x
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. . . . .		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		x
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed \_\_\_\_\_
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.  
 JIM REEVES, 730 BAYFRONT PKWY STE 4B, PENSACOLA, FL 32502 (850)438-4400

**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.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KEVIN HAGEN PRESIDENT	0.50	X		X				750.	0.	0.
(2) HAL GEORGE VICE PRESIDENT	0.00	X		X				750.	0.	0.
(3) ALICIA CHRISTY SECRETARY/TREASURER	0.00	X		X				500.	0.	0.
(4) MAGGIE DAVIS DIRECTOR	0.00	X						0.	0.	0.
(5) VICTOR BINDI DIRECTOR	0.00	X						250.	0.	0.
(6) JAMES WARWICK DIRECTOR	0.00	X						750.	0.	0.
(7) CEDRIC ALEXANDER DIRECTOR	0.00	X						250.	0.	0.
(8) GUS ALLEN DIRECTOR	0.00	X						0.	0.	0.
(9) KATIN DAVIS DIRECTOR	0.00	X						0.	0.	0.
(10)										
(11)										
(12)										
(13)										
(14)										

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
<b>1b Subtotal</b>							3,250.	0.	0.	
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>							3,250.	0.	0.	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

**Part VIII Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants, and Other Similar Amounts</b>	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b>					
	<b>b</b>	Membership dues . . . . .	<b>1b</b>					
	<b>c</b>	Fundraising events . . . . .	<b>1c</b>					
	<b>d</b>	Related organizations . . . . .	<b>1d</b>					
	<b>e</b>	Government grants (contributions)	<b>1e</b>	18,375.				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	201,997.				
	<b>g</b>	Noncash contributions included in lines 1a-1f . . . . .	<b>1g</b>	\$ 17,893.				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .		220,372.				
	<b>Program Service Revenue</b>	<b>2a</b>	RENTS COLLECTED	Business Code 531110	1,370,881.	1,370,881.	0.	0.
<b>b</b>		OTHER RENTAL INCOME	531110	11,592.	11,592.	0.	0.	
<b>c</b>		-----						
<b>d</b>		-----						
<b>e</b>		-----						
<b>f</b>		All other program service revenue . .						
<b>g</b>		<b>Total.</b> Add lines 2a-2f . . . . .		1,382,473.				
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . .		23,192.	0.	0.	23,192.	
	<b>4</b>	Income from investment of tax-exempt bond proceeds						
	<b>5</b>	Royalties . . . . .						
	<b>6a</b>	Gross rents . . . . .	<b>6a</b>	(i) Real				
				(ii) Personal				
	<b>b</b>	Less: rental expenses	<b>6b</b>					
	<b>c</b>	Rental income or (loss)	<b>6c</b>					
	<b>d</b>	Net rental income or (loss) . . . . .						
	<b>7a</b>	Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
				(ii) Other		0.		
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .	<b>7b</b>		134.			
	<b>c</b>	Gain or (loss) . . . . .	<b>7c</b>		-134.			
<b>d</b>	Net gain or (loss) . . . . .		-134.	-134.	0.	0.		
<b>8a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>8a</b>						
<b>b</b>	Less: direct expenses . . . . .	<b>8b</b>						
<b>c</b>	Net income or (loss) from fundraising events . . . . .							
<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>9a</b>						
<b>b</b>	Less: direct expenses . . . . .	<b>9b</b>						
<b>c</b>	Net income or (loss) from gaming activities . . . . .							
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>10a</b>						
<b>b</b>	Less: cost of goods sold . . . . .	<b>10b</b>						
<b>c</b>	Net income or (loss) from sales of inventory . . . . .							
<b>Miscellaneous Revenue</b>	<b>11a</b>	INSURANCE PROCEEDS	Business Code 999999	1,147.	1,147.	0.	0.	
	<b>b</b>	-----						
	<b>c</b>	-----						
	<b>d</b>	All other revenue . . . . .						
	<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .		1,147.				
<b>12</b>	<b>Total revenue.</b> See instructions . . . . .		1,627,050.	1,383,486.	0.	23,192.		



**Part IX Statement of Functional Expenses**

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

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

**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .				
<b>4</b> Benefits paid to or for members . . . . .				
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	3,250.	0.	3,250.	0.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
<b>7</b> Other salaries and wages . . . . .	226,242.	124,433.	101,809.	0.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	778.	428.	350.	0.
<b>9</b> Other employee benefits . . . . .				
<b>10</b> Payroll taxes . . . . .	17,826.	9,804.	8,022.	0.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management . . . . .	165,606.	140,856.	24,750.	0.
<b>b</b> Legal . . . . .	5,519.	0.	5,519.	0.
<b>c</b> Accounting . . . . .	33,563.	0.	33,563.	0.
<b>d</b> Lobbying . . . . .				
<b>e</b> Professional fundraising services. See Part IV, line 17 . . . . .				
<b>f</b> Investment management fees . . . . .				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . . . . .				
<b>12</b> Advertising and promotion . . . . .				
<b>13</b> Office expenses . . . . .	16,779.	0.	16,779.	0.
<b>14</b> Information technology . . . . .	8,619.	0.	8,619.	0.
<b>15</b> Royalties . . . . .				
<b>16</b> Occupancy . . . . .	79,270.	39,094.	40,176.	0.
<b>17</b> Travel . . . . .				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	953.	0.	953.	0.
<b>19</b> Conferences, conventions, and meetings . . . . .	2,320.	0.	2,320.	0.
<b>20</b> Interest . . . . .	111,143.	111,143.	0.	0.
<b>21</b> Payments to affiliates . . . . .				
<b>22</b> Depreciation, depletion, and amortization . . . . .	219,795.	216,996.	2,799.	0.
<b>23</b> Insurance . . . . .	166,835.	150,095.	16,740.	0.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> APPLIANCE EXPENSE . . . . .	6,675.	6,675.	0.	0.
<b>b</b> FEES . . . . .	2,848.	2,848.	0.	0.
<b>c</b> BANK FEES . . . . .	950.	0.	950.	0.
<b>d</b> LICENSES & TAXES . . . . .	18,654.	18,492.	162.	0.
<b>e</b> All other expenses . . . . .	173,415.	155,244.	18,171.	0.
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	1,261,040.	976,108.	284,932.	0.
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	436,464.	<b>1</b>	222,808.
	<b>2</b> Savings and temporary cash investments . . . . .	322,031.	<b>2</b>	543,249.
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	204,267.	<b>4</b>	219,296.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	-50.
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	90,383.	<b>9</b>	115,636.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b> 7,145,600.		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 2,832,135.	3,433,900.	<b>10c</b> 4,313,465.
	<b>11</b> Investments—publicly traded securities . . . . .		<b>11</b>	
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .	54,758.	<b>14</b>	44,067.
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	1.	<b>15</b>	2.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) . . . . .		4,541,804.	<b>16</b>	5,458,473.
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	9,727.	<b>17</b>	17,305.
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .	26,000.	<b>22</b>	14,000.
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	1,646,870.	<b>23</b>	2,191,793.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	102,743.	<b>24</b>	112,901.
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D . . . . .		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .		1,785,340.	<b>26</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .		<b>27</b>	
	<b>28</b> Net assets with donor restrictions . . . . .		<b>28</b>	
	<b>Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds . . . . .	2,756,464.	<b>31</b>	3,122,474.
<b>32</b> Total net assets or fund balances . . . . .		2,756,464.	<b>32</b>	3,122,474.
<b>33</b> Total liabilities and net assets/fund balances . . . . .		4,541,804.	<b>33</b>	5,458,473.



**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	1,627,050.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	1,261,040.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	366,010.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	2,756,464.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	3,122,474.

**Part XII Financial Statements and Reporting**

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

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . . If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . . If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
<b>3a</b> 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? . . . . .		X
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .		

**SCHEDULE A  
(Form 990)**

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2023**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/Form990) for instructions and the latest information.

<b>Name of the organization</b> AMR AT PENSACOLA INC	<b>Employer identification number</b> 59-2940706
---	---

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10  An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4 Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> 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) . . . . .						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>7</b> Amounts from line 4 . . . . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) . . . . .	<b>14</b>	%
<b>15</b> Public support percentage from 2022 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a 33 1/3% support test—2023.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 33 1/3% support test—2022.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a 10%-facts-and-circumstances test—2023.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 10%-facts-and-circumstances test—2022.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		<input type="checkbox"/>

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	35,239.	87,438.	30,284.	401,768.	220,372.	775,101.
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . .	966,883.	1,045,474.	1,163,512.	1,274,008.	1,383,620.	5,833,497.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . .	1,002,122.	1,132,912.	1,193,796.	1,675,776.	1,603,992.	6,608,598.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b . . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . . .						6,608,598.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>9</b> Amounts from line 6 . . . . .	1,002,122.	1,132,912.	1,193,796.	1,675,776.	1,603,992.	6,608,598.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,429.	3,969.	951.	4,998.	23,192.	37,539.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .	4,429.	3,969.	951.	4,998.	23,192.	37,539.
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .	1,006,551.	1,136,881.	1,194,747.	1,680,774.	1,627,184.	6,646,137.
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) . . . . .	<b>15</b>	99.44 %
<b>16</b> Public support percentage from 2022 Schedule A, Part III, line 15 . . . . .	<b>16</b>	99.69 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2023</b> (line 10c, column (f), divided by line 13, column (f)) . . . . .	<b>17</b>	0.56 %
<b>18</b> Investment income percentage from <b>2022</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	0.31 %
<b>19a 33 1/3% support tests—2023.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . .	<input checked="" type="checkbox"/>	
<b>b 33 1/3% support tests—2022.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . .	<input type="checkbox"/>	
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . .	<input type="checkbox"/>	

**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**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
3b	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
4c	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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
5b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5c	<b>Substitutions only.</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
9b	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? <i>If "Yes," provide detail in Part VI.</i>		
9c	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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

		Yes	No
<b>11</b>	Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b>	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?		
	<b>11a</b>		
<b>b</b>	A family member of a person described on line 11a above?		
	<b>11b</b>		
<b>c</b>	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 <b>Part VI</b> .		
	<b>11c</b>		

**Section B. Type I Supporting Organizations**

		Yes	No
<b>1</b>	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.		
	<b>1</b>		
<b>2</b>	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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
	<b>2</b>		

**Section C. Type II Supporting Organizations**

		Yes	No
<b>1</b>	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 supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
	<b>1</b>		

**Section D. All Type III Supporting Organizations**

		Yes	No
<b>1</b>	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?		
	<b>1</b>		
<b>2</b>	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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
	<b>2</b>		
<b>3</b>	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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		
	<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b>	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).		
<b>2</b>	Activities Test. <b>Answer lines 2a and 2b below.</b>		
<b>a</b>	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 <b>Part VI identify those supported organizations and explain</b> 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>2a</b>		
<b>b</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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
	<b>2b</b>		
<b>3</b>	Parent of Supported Organizations. <b>Answer lines 3a and 3b below.</b>		
<b>a</b>	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 <b>Part VI</b> .		
	<b>3a</b>		
<b>b</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 <b>Part VI</b> the role played by the organization in this regard.		
	<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1**  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A—Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3.	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	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)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>	
<b>Section B—Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
<b>2</b>	Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by 0.035.	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C—Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>	
<b>2</b>	Enter 0.85 of line 1.	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3.	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		







Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

AMR AT PENSACOLA INC

Employer identification number

59-2940706

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)( 3 ) (enter number) organization

[ ] 4947(a)(1) nonexempt charitable trust not 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

[X] 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

[ ] 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 . . . . . \$ \_\_\_\_\_

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).

Name of organization

AMR AT PENSACOLA INC

Employer identification number

59-2940706

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	McGuires Management Group 600 E Gregory St Pensacola FL 32502	\$ 15,000.	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Carolyn Palmer 100 Highpoint Dr Gulf Breeze FL 32561	\$ 15,000.	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	AWKO Justice Foundation 17 E Main St, Ste 200 Pensacola FL 32502	\$ 75,000.	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	The Sandy Sansing Foundation 5705 Pensacola Blvd Pensacola FL 32505	\$ 75,000.	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	H+H Building Group 601 E Romana St Pensacola FL 32502	\$ 5,612.	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	ECUA PO BOX 18870 PENSACOLA FL 32523	\$ 7,458.	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization AMR AT PENSACOLA INC	Employer identification number 59-2940706
--	--

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions.)</small>	(d) Date received
5	FURNITURE AND SUPPLIES FOR THE TINY HOMES ..... ..... .....	\$ 5,612.	06/30/2024
6	Waived Sewer and Water Impact Fees ..... ..... .....	\$ 7,458.	06/30/2024
.....	..... ..... .....	\$ .....	.....
.....	..... ..... .....	\$ .....	.....
.....	..... ..... .....	\$ .....	.....
.....	..... ..... .....	\$ .....	.....
.....	..... ..... .....	\$ .....	.....

Name of organization AMR AT PENSACOLA INC	Employer identification number 59-2940706
--	--

**Part III** *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.* Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization: AMR AT PENSACOLA INC; Employer identification number: 59-2940706

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form for Part II Conservation Easements, including questions 1-9 and a table for lines 2a-2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, including questions 1a-2 and monetary amounts.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

**3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange program
- e**  Other .....

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  **Yes**  **No**

**Part IV Escrow and Custodial Arrangements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  **Yes**  **No**

**b** If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
<b>1c</b> Beginning balance	
<b>1d</b> Additions during the year	
<b>1e</b> Distributions during the year	
<b>1f</b> Ending balance	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  **Yes**  **No**

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance					
<b>b</b> Contributions					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> End of year balance					

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment \_\_\_\_\_%
- b** Permanent endowment \_\_\_\_\_%
- c** Term endowment \_\_\_\_\_%

The percentages on lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations?  **Yes**  **No**
- (ii)** Related organizations?  **Yes**  **No**

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

**b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land	730,513.			730,513.
<b>b</b> Buildings	5,186,146.		2,525,944.	2,660,202.
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		1,228,941.	306,191.	922,750.
<b>e</b> Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				4,313,465.

**Part VII Investments—Other Securities**

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) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 12, col. (B)) . . .		

**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-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 13, col. (B)) . . .		

**Part IX Other Assets**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B)) . . . . .	

**Part X Other Liabilities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B)) . . . . .	

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 .



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	1,682,499.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>		
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	55,449.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	55,449.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	1,627,050.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .		<b>5</b>	1,627,050.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	1,248,315.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	1,248,315.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	12,725.	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	12,725.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .		<b>5</b>	1,261,040.

**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.

Pt XI, Line 2d: INCOME IS REPORTED IN CASH ON TAX RETURN BUT ACCRUAL ON AUDIT.

THIS IS THE DIFFERENCE BETWEEN THE EXPENSE NUMBERS

Pt XII, Line 4b: EXPENSES ARE REPORTED IN CASH ON TAX RETURN BUT ACCRUAL ON

AUDIT. THIS IS THE DIFFERENCE BETWEEN THE INCOME NUMBERS



**SCHEDULE L  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

**Open to Public Inspection**

Name of the organization <b>AMR AT PENSACOLA INC</b>	Employer identification number <b>59-2940706</b>
---	---

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2	Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958	\$	
3	Enter the amount of tax, if any, on line 2, above, reimbursed by the organization	\$	

**Part II Loans to and/or From Interested Persons**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
				(1)	JAMES J REEVES			FOUNDING MEMBER	CASH	X		40,000.	14,000.
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
<b>Total</b>							\$	14,000.					

**Part III Grants or Assistance Benefiting Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

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

Schedule L (Form 990) 2023



**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Name of the organization

AMR AT PENSACOLA INC

Employer identification number

59-2940706

Pt VI, Line 11b: A copy of the 990 is sent to each director and officer before  
it is filed.

Pt VI, Line 12c: Are asked annually if they have any conflicts of interest.

Pt IX, Line 24e:

Description: CONTRACTS & REPAIRS

Total: \$40,504

Program services: \$40,212

Management and general: \$292

Fundraising: \$0

Description: MAINTENANCE

Total: \$68,540

Program services: \$68,540

Management and general: \$0

Fundraising: \$0

Description: TOOLS

Total: \$7,401

Program services: \$7,401

Management and general: \$0

Fundraising: \$0

Description: DEPRECIATION ADJUSTMENT

Total: -\$40,489

Program services: -\$40,489

Management and general: \$0

Fundraising: \$0

Description: LEASED EMPLOYEE EXP

Name of the organization AMR AT PENSACOLA INC	Employer identification number 59-2940706
--	--

Total: \$5,973

Program services: \$3,285

Management and general: \$2,688

Fundraising: \$0

Description: LANDSCAPING

Total: \$43,265

Program services: \$43,265

Management and general: \$0

Fundraising: \$0

Description: CLEANING

Total: \$2,315

Program services: \$2,315

Management and general: \$0

Fundraising: \$0

Description: TERMITE AND PEST

Total: \$18,963

Program services: \$18,963

Management and general: \$0

Fundraising: \$0

Description: CONTRACT SERVICES

Total: \$6,123

Program services: \$6,123

Management and general: \$0

Fundraising: \$0

Description: BOOKS, SUBSCRIPTIONS

Total: \$1,622

Program services: \$0

Name of the organization AMR AT PENSACOLA INC	Employer identification number 59-2940706
--	--

Management and general: \$1,622

Fundraising: \$0

Description: FUEL

Total: \$1,963

Program services: \$1,109

Management and general: \$854

Fundraising: \$0

Description: JANITORIAL FEE

Total: \$4,520

Program services: \$4,520

Management and general: \$0

Fundraising: \$0

Description: DUES

Total: \$5,661

Program services: \$0

Management and general: \$5,661

Fundraising: \$0

Description: MISC

Total: \$168

Program services: \$0

Management and general: \$168

Fundraising: \$0

Description: DONATIONS

Total: \$6,888

Program services: \$0

Management and general: \$6,888

Fundraising: \$0

Name of the organization

Employer identification number

AMR AT PENSACOLA INC

59-2940706

Description: ROUNDING

Total: -\$2

Program services: \$0

Management and general: -\$2

Fundraising: \$0



# IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning Jul 1, 2023, and ending Jun 30, 2024

# 2023

Department of the Treasury  
Internal Revenue Service

**Do not send to the IRS. Keep for your records.**  
Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.

Name of filer <b>AMR AT PENSACOLA INC</b>	EIN or SSN <b>59-2940706</b>
Name and title of officer or person subject to tax <b>KEVIN HAGEN, PRESIDENT</b>	

## Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

<b>1a</b> Form 990 check here <input checked="" type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990, Part VIII, column (A), line 12)	<b>1b</b> <u>1,627,050.</u>
<b>2a</b> Form 990-EZ check here <input type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990-EZ, line 9)	<b>2b</b> _____
<b>3a</b> Form 1120-POL check here <input type="checkbox"/>	<b>b</b> Total tax (Form 1120-POL, line 22)	<b>3b</b> _____
<b>4a</b> Form 990-PF check here <input type="checkbox"/>	<b>b</b> Tax based on investment income (Form 990-PF, Part V, line 5)	<b>4b</b> _____
<b>5a</b> Form 8868 check here <input type="checkbox"/>	<b>b</b> Balance due (Form 8868, line 3c)	<b>5b</b> _____
<b>6a</b> Form 990-T check here <input type="checkbox"/>	<b>b</b> Total tax (Form 990-T, Part III, line 4)	<b>6b</b> _____
<b>7a</b> Form 4720 check here <input type="checkbox"/>	<b>b</b> Total tax (Form 4720, Part III, line 1)	<b>7b</b> _____
<b>8a</b> Form 5227 check here <input type="checkbox"/>	<b>b</b> FMV of assets at end of tax year (Form 5227, Item D)	<b>8b</b> _____
<b>9a</b> Form 5330 check here <input type="checkbox"/>	<b>b</b> Tax due (Form 5330, Part II, line 19)	<b>9b</b> _____
<b>10a</b> Form 8038-CP check here <input type="checkbox"/>	<b>b</b> Amount of credit payment requested (Form 8038-CP, Part III, line 22)	<b>10b</b> _____

## Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that  I am an officer of the above entity or  I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

### PIN: check one box only

I authorize KURBEC & CANTIN CPA, PA to enter my PIN 

3	2	5	0	2
---	---	---	---	---

 as my signature  
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax \_\_\_\_\_ Date 11/25/2024

## Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

5	9	4	2	9	8	2	2	2	2	2
---	---	---	---	---	---	---	---	---	---	---

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature \_\_\_\_\_ Date 11/25/2024

**ERO Must Retain This Form – See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**



# Request for Taxpayer Identification Number and Certification

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give form to the  
requester. Do not  
send to the IRS.**

**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type.  
See Specific Instructions on page 3.

<b>1</b>	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) <b>AMR AT Pensacola, Inc.</b>	
<b>2</b>	Business name/disregarded entity name, if different from above.	
<b>3a</b>	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ <small>Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.</small> <input type="checkbox"/> Other (see instructions) _____	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see Instructions on page 3):  Exempt payee code (if any) <u>1</u>  Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) <u>A</u>
<b>3b</b>	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See Instructions _____ <input type="checkbox"/>	(Applies to accounts maintained outside the United States.)
<b>5</b>	Address (number, street, and apt. or suite no.). See Instructions. <b>730 Bayfront Pkwy Ste 4B</b>	Requester's name and address (optional)
<b>6</b>	City, state, and ZIP code <b>Pensacola, FL 32502</b>	
<b>7</b>	List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

<b>Social security number</b>	
[ ] [ ] [ ] - [ ] [ ] - [ ] [ ] [ ] [ ]	
or	
<b>Employer identification number</b>	
5 9 - 2 9 4 0 7 0 6	

**Note:** If the account is in more than one name, see the Instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the Instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person	Date <b>December 04, 2024</b>
------------------	--------------------------	-------------------------------

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1085).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

must obtain your correct taxpayer identification number (TIN), which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid).
- Form 1099-DIV (dividends, including those from stocks or mutual funds).
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds).
- Form 1099-NEC (nonemployee compensation).
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers).
- Form 1099-S (proceeds from real estate transactions).
- Form 1099-K (merchant card and third-party network transactions).
- Form 1098 (home mortgage interest), 1098-E (student loan interest), and 1098-T (tuition).
- Form 1099-C (canceled debt).
- Form 1099-A (acquisition or abandonment of secured property).

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

**Caution:** If you don't return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

**By signing the filled-out form, you:**

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued);
2. Certify that you are not subject to backup withholding; or
3. Claim exemption from backup withholding if you are a U.S. exempt payee; and
4. Certify to your non-foreign status for purposes of withholding under chapter 3 or 4 of the Code (if applicable); and
5. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting is correct. See *What is FATCA Reporting*, later, for further information.

**Note:** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding.** Payments made to foreign persons, including certain distributions, allocations of income, or transfers of sales proceeds, may be subject to withholding under chapter 3 or chapter 4 of the Code (sections 1441-1474). Under those rules, if a Form W-9 or other certification of non-foreign status has not been received, a withholding agent, transferee, or partnership (payor) generally applies presumption rules that may require the payor to withhold applicable tax from the recipient, owner, transferor, or partner (payee). See Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*.

The following persons must provide Form W-9 to the payor for purposes of establishing its non-foreign status.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the disregarded entity.
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the grantor trust.
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust and not the beneficiaries of the trust.

See Pub. 515 for more information on providing a Form W-9 or a certification of non-foreign status to avoid withholding.

**Foreign person.** If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person (under Regulations section 1.1441-1(b)(2)(iv) or other applicable section for chapter 3 or 4 purposes), do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515). If you are a qualified foreign pension fund under Regulations section 1.897(l)-1(d), or a partnership that is wholly owned by qualified foreign pension funds, that is treated as a non-foreign person for purposes of section 1445 withholding, do not use Form W-9. Instead, use Form W-8EXP (or other certification of non-foreign status).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a saving clause. Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if their stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first Protocol) and is relying on this exception to claim an exemption from tax on their scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

## Backup Withholding

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include, but are not limited to, interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third-party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester;
2. You do not certify your TIN when required (see the Instructions for Part II for details);
3. The IRS tells the requester that you furnished an incorrect TIN;
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only); or
5. You do not certify to the requester that you are not subject to backup withholding, as described in item 4 under "*By signing the filled-out form*" above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier.

## What Is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all U.S. account holders that are specified U.S. persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

## Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you are no longer tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

- **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

**Note for ITIN applicant:** Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040 you filed with your application.

- **Sole proprietor.** Enter your individual name as shown on your Form 1040 on line 1. Enter your business, trade, or "doing business as" (DBA) name on line 2.

- **Partnership, C corporation, S corporation, or LLC, other than a disregarded entity.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

- **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. Enter any business, trade, or DBA name on line 2.

- **Disregarded entity.** In general, a business entity that has a single owner, including an LLC, and is not a corporation, is disregarded as an entity separate from its owner (a disregarded entity). See Regulations section 301.7701-2(c)(2). A disregarded entity should check the appropriate box for the tax classification of its owner. Enter the owner's name on line 1. The name of the owner entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For

example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2. If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

### Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, enter it on line 2.

### Line 3a

Check the appropriate box on line 3a for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3a.

IF the entity/individual on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation.
• Individual or • Sole proprietorship	Individual/sole proprietor.
• LLC classified as a partnership for U.S. federal tax purposes or • LLC that has filed Form 8832 or 2553 electing to be taxed as a corporation	Limited liability company and enter the appropriate tax classification: P = Partnership, C = C corporation, or S = S corporation.
• Partnership	Partnership.
• Trust/estate	Trust/estate.

### Line 3b

Check this box if you are a partnership (including an LLC classified as a partnership for U.S. federal tax purposes), trust, or estate that has any foreign partners, owners, or beneficiaries, and you are providing this form to a partnership, trust, or estate, in which you have an ownership interest. You must check the box on line 3b if you receive a Form W-8 (or documentary evidence) from any partner, owner, or beneficiary establishing foreign status or if you receive a Form W-9 from any partner, owner, or beneficiary that has checked the box on line 3b.

**Note:** A partnership that provides a Form W-9 and checks box 3b may be required to complete Schedules K-2 and K-3 (Form 1065). For more information, see the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

If you are required to complete line 3b but fail to do so, you may not receive the information necessary to file a correct information return with the IRS or furnish a correct payee statement to your partners or beneficiaries. See, for example, sections 6698, 6722, and 6724 for penalties that may apply.

### Line 4 Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

#### Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third-party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space on line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2).

- 2—The United States or any of its agencies or instrumentalities.
- 3—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities.
- 5—A corporation.
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or territory.
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission.
- 8—A real estate investment trust.
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940.
- 10—A common trust fund operated by a bank under section 584(a).
- 11—A financial institution as defined under section 581.
- 12—A middleman known in the investment community as a nominee or custodian.
- 13—A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
• Interest and dividend payments	All exempt payees except for 7.
• Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
• Barter exchange transactions and patronage dividends	Exempt payees 1 through 4.
• Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 5. <sup>2</sup>
• Payments made in settlement of payment card or third-party network transactions	Exempt payees 1 through 4.

<sup>1</sup> See Form 1099-MISC, Miscellaneous Information, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

**Exemption from FATCA reporting code.** The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) entered on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37).
- B—The United States or any of its agencies or instrumentalities.
- C—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i).
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i).

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state.

- G—A real estate investment trust.
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940.
- I—A common trust fund as defined in section 584(a).
- J—A bank as defined in section 581.
- K—A broker.
- L—A trust exempt from tax under section 664 or described in section 4947(a)(1).
- M—A tax-exempt trust under a section 403(b) plan or section 457(g) plan.

**Note:** You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

**Line 5**

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, enter "NEW" at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

**Line 6**

Enter your city, state, and ZIP code.

**Part I. Taxpayer Identification Number (TIN)**

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have, and are not eligible to get, an SSN, your TIN is your IRS ITIN. Enter it in the entry space for the Social security number. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note:** See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at [www.SSA.gov](http://www.SSA.gov). You may also get this form by calling 800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/EIN](http://www.irs.gov/EIN). Go to [www.irs.gov/Forms](http://www.irs.gov/Forms) to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to [www.irs.gov/OrderForms](http://www.irs.gov/OrderForms) to place an order and have Form W-7 and/or Form SS-4 mailed to you within 15 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and enter "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, you will generally have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note:** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon. See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier, for when you may instead be subject to withholding under chapter 3 or 4 of the Code.

**Caution:** A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.



## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

**Signature requirements.** Complete the certification as indicated in items 1 through 5 below.

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- 3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third-party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABL accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

## What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>1</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
6. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
7. Grantor trust filing under Optional Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))**	The grantor <sup>4</sup>

For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing Form 1041 or under the Optional Filing Method 2, requiring Form 1099 (see Regulations section 1.671-4(b)(2)(i)(B))**	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name on line 1, and enter your business or DBA name, if any, on line 2. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

\* **Note:** The grantor must also provide a Form W-9 to the trustee of the trust.

\*\* For more information on optional filing methods for grantor trusts, see the Instructions for Form 1041.

**Note:** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

## Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information, such as your name, SSN, or other identifying information, without your permission to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax return preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity, or a questionable credit report, contact the IRS Identity Theft Hotline at 800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 877-777-4778 or TTY/TDD 800-829-4059.

**Protect yourself from suspicious emails or phishing schemes.**

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 800-366-4484. You can forward suspicious emails to the Federal Trade Commission at [spam@uce.gov](mailto:spam@uce.gov) or report them at [www.ftc.gov/complaint](http://www.ftc.gov/complaint). You can contact the FTC at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see [www.IdentityTheft.gov](http://www.IdentityTheft.gov) and Pub. 5027.

Go to [www.irs.gov/IdentityTheft](http://www.irs.gov/IdentityTheft) to learn more about identity theft and how to reduce your risk.

## Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their laws. The information may also be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payors must generally withhold a percentage of taxable interest, dividends, and certain other payments to a payee who does not give a TIN to the payor. Certain penalties may also apply for providing false or fraudulent information.