

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2023

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the **2023** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization INLAND EQUITY COMMUNITY LAND TRUST		D Employer identification number 84-4985523
	Doing business as		E Telephone number 951-999-7184
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 1,200,921.
	41550 ECLECTIC ST		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code PALM DESERT, CA 92260		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No

F Name and address of principal officer: **MARIBEL NUNEZ**
SAME AS C ABOVE

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **HTTPS://INLANDEQUITYCLT.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **2020** **M** State of legal domicile: **CA**

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: INLAND EQUITY COMMUNITY LAND TRUST IS DEDICATED TO THE SOCIAL AND CHARITABLE DEVELOPMENT AND		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	3
	6 Total number of volunteers (estimate if necessary)	6	50
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	275,018.	1,200,433.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	488.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	275,018.	1,200,921.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	29,569.	22,500.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	142,920.	148,059.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	24,839.	64,107.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	197,328.	234,666.	
19 Revenue less expenses. Subtract line 18 from line 12	77,690.	966,255.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 353,679.	End of Year 1,137,027.
	21 Total liabilities (Part X, line 26)	100,000.	100,996.
	22 Net assets or fund balances. Subtract line 21 from line 20	253,679.	1,036,031.

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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <i>Maribel Nunez</i>	Date 09/19/2024			
	MARIBEL NUNEZ, EXECUTIVE DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name CARLOS CARAZO	Preparer's signature CARLOS CARAZO	Date 09/10/24	Check if self-employed <input type="checkbox"/>	PTIN P02046597
	Firm's name SMITH MARION & CO.	Firm's EIN 83-1445511	Phone no. 909-307-2323		
	Firm's address 1940 ORANGE TREE LANE, SUITE 100 REDLANDS, CA 92374				

May the IRS discuss this return with the preparer shown above? See instructions Yes No

California Exempt Organization Annual Information Return

Calendar Year 2023 or fiscal year beginning (mm/dd/yyyy), and ending (mm/dd/yyyy)

Corporation/Organization name California corporation number

INLAND EQUITY COMMUNITY LAND TRUST

4555263

Additional information. See instructions.

FEIN

84-4985523

Street address (suite or room)

41550 ECLECTIC ST

PMB no.

City

PALM DESERT

State

CA

ZIP code

92260

Foreign country name

Foreign province/state/county

Foreign postal code

- A First return
B Amended return
C IRC Section 4947(a)(1) trust
D Final information return?
E Check accounting method
F Federal return filed?
G Is this a group filing?
H Is this organization in a group exemption

- I Did the organization have any changes to its guidelines not reported to the FTB?
J If exempt under R&TC Section 23701d, has the organization engaged in political activities?
K Is the organization exempt under R&TC Section 23701g?
L Is the organization a limited liability company?
M Did the organization file Form 100 or Form 109 to report taxable income?
N Is the organization under audit by the IRS or has the IRS audited in a prior year?
O Is federal Form 1023/1024 pending?

Part I Complete Part I unless not required to file this form. See General Information B and C.

Table with 4 columns: Description, Line number, Amount, and Balance. Rows include Receipts and Revenues (lines 1-8), Expenses (lines 9-10), and Payments (lines 11-16).

Sign Here section containing signature of Maribel Nunez, Title EXECUTIVE DIRE, Date 09/19/2024, and Preparer's signature CARLOS CARAZO, Firm's name SMITH MARION & CO., and address 1940 ORANGE TREE LANE, SUITE 100 REDLANDS, CA 92374.

**ANNUAL REGISTRATION RENEWAL FEE REPORT
TO ATTORNEY GENERAL OF CALIFORNIA**
Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-307, and 310

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

MAIL TO:
Registry of Charities and Fundraisers
P.O. Box 903447
Sacramento, CA 94203-4470
STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
WEBSITE ADDRESS:
www.oag.ca.gov/charities

<p><u>INLAND EQUITY COMMUNITY LAND TRUST</u> Name of Organization</p> <hr/> <p>List all DBAs and names the organization uses or has used</p> <p><u>41550 ECLECTIC ST</u> Address (Number and Street)</p> <p><u>PALM DESERT, CA 92260</u> City or Town, State, and ZIP Code</p> <p><u>951-999-7184</u> <u>JEFF@INLANDEQUITYPARTNE</u> Telephone Number E-mail Address</p>	<p>Check if:</p> <p><input type="checkbox"/> Change of address</p> <p><input type="checkbox"/> Amended report</p> <p><input type="checkbox"/> Organization requests email notifications</p> <hr/> <p>State Charity Registration Number <u>0282276</u></p> <p>Corporation or Organization No. <u>4555263</u></p> <p>Federal Employer ID No. <u>84-4985523</u></p>
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ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, and 310)
Make Check Payable to Department of Justice

Total Revenue	Fee	Total Revenue	Fee	Total Revenue	Fee
Less than \$50,000	\$25	Between \$250,001 and \$1 million	\$100	Between \$20,000,001 and \$100 million	\$800
Between \$50,000 and \$100,000	\$50	Between \$1,000,001 and \$5 million	\$200	Between \$100,000,001 and \$500 million	\$1,000
Between \$100,001 and \$250,000	\$75	Between \$5,000,001 and \$20 million	\$400	Greater than \$500 million	\$1,200

PART A - ACTIVITIES

For your most recent full accounting period (beginning 01/01/2023 ending 12/31/2023) list:

Total Revenue (including noncash contributions) \$ 1,200,921 Noncash Contributions \$ 0 Total Assets \$ 1,137,027
 Program Expenses \$ 201,738 Total Expenses \$ 234,666

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?		X
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?		X
5. During this reporting period, did the organization receive any governmental funding?		X
6. During this reporting period, did the organization hold a raffle for charitable purposes?		X
7. Does the organization conduct a vehicle donation program?		X
8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?		X
9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?		X

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.

Maribel Nunez **MARIBEL NUNEZ** **EXECUTIVE DIRECTOR** 09/19/2024
 Signature of Authorized Agent Printed Name Title Date




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SSR Document History

September 19, 2024

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