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) Open to Public Do not enter social security numbers on this form as it may be made public. Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2023 calendar year, or tax year beginning 01-01 2023, and ending 12-31 ,2023 Check if applicable: C Name of organization SonLight Power Inc D Employer identification number Address change Doing business as 26-0007636 E Telephone number Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Initial return 5140 River Valley Road (513)285-9960 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts Amended return Milford, OH 45150 903,683 X No Application pending F Name and address of principal officer: Kevin Sasson **H(a)** Is this a group return for subordinates? Same as C above H(b) Are all subordinates included? **X** 501(c)(3) 501(c) (4947(a)(1) or 527 If "No," attach a list. See instructions www.sonlightpower.org Website: H(c) Group exemption number X Corporation Trust Association L Year of formation: 2002 M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: SonLight Power improves the lives of children, families and communities via sustainable solar-powered solutions, SonLight applies Christian Activities & Governance faith and solar energy to advance education, job training, wellness, water access, spiritual and economic development. Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 8 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 6 100 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 Prior Year **Current Year** 0 Revenue 762,568 900,073 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 5,102 3,606 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 767,679 903,683 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 194,777 284,971 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 605,859 418,664 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 800,636 703,635 (32,957) 200,048 End of Year **Beginning of Current Year** 20 Total assets (Part X, line 16) . . . 427,727 195,705 21 Total liabilities (Part X, line 26) 6,003 37,977 Net assets or fund balances. Subtract line 21 from line 20 189,702 389,750 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 Kevin Sasson Sign Signature of officer Date Here Kevin Sasson, Executive Director Type or print name and title

Date

10-10-2024

May the IRS discuss this return with the preparer shown above? See instructions

Preparer's signature

5995 Fairfield Rd Ste 5

Oxford OH 45056

Gary M Antonius

Antonius Tax & Consulting LLC

Print/Type preparer's name

Firm's name

Firm's address

Gary M Antonius

No

PTIN

513-523-4494

P00063384

Yes

Check

Firm's EIN

Phone no.

self-employed

Paid

Preparer

Use Only

rai	Check if Cabadula Constains a response as note to any line in this Bort III
	Check if Schedule O contains a response or note to any line in this Part III
I	Briefly describe the organization's mission:
	SonLight Power improves the lives of children, families and communities via sustainable
	solar-powered solutions. SonLight applies Christian faith and solar energy to advance education,
	job training, wellness, water access, spiritual and economic development.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	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 \$ 336,933 including grants of \$) (Revenue \$ 511,761)
+a	Equipping Outreach: SonLight Power annually provides solar expertise for outreach organizations
	operating in developing parts of the world with non-existent, limited or unreliable supplies of
	electric power. This challenge is especially evident in countries where the overwhelming needs of
	schools, medical clinics, orphanages and churches far exceed the capacity of public
	infrastructure. Each year, SonLight Power helps numerous mission organizations improve
	sustainability while reducing dependency on expensive generator fuel. SonLight also provides
	solar expertise for U.S. Tax Exempt organizations to improve sustainability and increase
	engagement in the SonLight mission. As a result, SonLight Equipping Outreach has empowered
	mission partners to focus more of their resources on improving more lives.
	middlen partners to rects more or their resources on improving more rives.
4b	(Code:) (Expenses \$ 286,986 including grants of \$) (Revenue \$ 386,442)
	Mission Trips: SonLight Power annually sponsors mission trips that impact children and their
	families living without access to reliable electricity. These trips generally consist of
	volunteer project teams that install solar power systems - connecting schools, medical clinics,
	community centers, orphanages, water-pumping stations and churches to a 30-year supply of
	sustainable electricity. Applications powered by SonLight solar projects include lights and
	multimedia tools to improve education, refrigeration to store food and life-saving vaccines and
	medicines, and water-pumping where clean water is scarce. Over the lifetime of SonLight's
	collaborative projects, the solar power generated makes an immediate and lasting impact for tens
	of thousands of lives.
	or thousands of fives.
4c	(Code:) (Expenses \$ 3,829 including grants of \$) (Revenue \$ 3,698)
	Solar School/Training: SonLight Power provides hands-on solar training in the U.S. and in mission
	areas to build technical expertise and encourage team-building. SonLight has designed workshops
	and curriculum to fit the needs of various audiences, primarily those looking to apply solar
	power in the mission field, educators interested in adding a solar power component to STEM-Based
	curriculum, and those curious about the general applications of solar power.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e_	Total program service expenses 627,748

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part L	,		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		Х
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		Λ
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а		44-		
L	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С		110		Х
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d				Λ
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е		11e		x
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part.X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	45		
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	16		v
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and JV.</i>	16		Х
.,	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
-	If "Yes," complete Schedule G, Part III	19		х
20 a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		x
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

Form 990 (2023) **Part IV** Ch 23) SonLight Power Inc
Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	04-		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	250		
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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?			
	If "Yes," complete Schedule L, Part I	25b		v
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		X
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part.II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (See the Schedule			
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part J	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
27	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part.VI	37		X
38	19? Note : All Form 990 filers are required to complete Schedule O	38		
Par		_ 30	Х	
rai	Check if Schedule O contains a response or note to any line in this Part V			
	Check in Concount C Contains a response of note to any fine in this Fait v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
•	reportable gaming (gambling) winnings to prize winners?	1c	х	
		' -		

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Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
0	sponsoring organizations maintaining donor advised runds. Did a donor advised fund maintained by the	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	14b		-
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
4.5	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
47	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities	47		
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	ii 103, complete i ullii 000a.			

Part VI

Se	ction A. Governing Body and Management		T	
_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	_		
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	_		
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	_		
2	the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q	9		Х
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		V	Nia
100	Did the expenientian have level shorters branches as effiliates?	100	Yes	No
l0a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10h		
140	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a 	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	120	.,,	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	Х	
С	describe on Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13	x	
13 14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by	17		
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
	Other officers or key employees of the organization	15b		х
b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	130		Λ
16a				
·ou	with a taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100		Λ
~	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed Ohio			
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			
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.			
-	Antonius Tax and Consulting LLC (513)523-4494, 5995 Fairfield Rd Ste 5, Oxford, OH	450!	56	

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

Check this box if neither the organization nor any rela	ted organizat	ion co	mpensa	ated a	any curr	ent	officer, director, or	trustee.	
				(C)	·				
(A)	(B)			osition			(D)	(E)	(F)
Name and title	Average	١, ١	not check		than one is both an		Reportable	Reportable	Estimated amount
	hours				or/trustee)		compensation	compensation	of other
	per week						from the organization (W-2/	from related organizations (W-2/	compensation from the
	(list any hours for	or o	Ins	Officer	em Hig	Fo	1099-MISC/	1099-MISC/	organization and
	related	direc	ttu	Officer	hest	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	tor tr	onal	5	e con				
	below	Individual trustee or director	Institutional trustee	9	lpen				
	dotted line)		ee	1	Highest compensated employee				
(1)Kevin Sasson	50.00								
Executive Director		х	2	2			81,077	0	0
(2)Keith Brown	2.00								
Board Member		х					0	0	0
(3)Angela Bradley	2.00								
Board Member		х					0	0	0
(4)Mark Fisher	2.00								
Board Member		х					0	0	0
(5)Liza Sanchez	2.00								
Board Member		х					0	0	0
(6)Rebecca Ott	2.00								
Board Member		х					0	0	0
(7)Colin Jeffries	2.00								
Vice President		х	2	ζ			0	0	0
(8)Monica Niehaus	2.00								
President		х	2	2			0	0	0
(9)Tina McKinley	2.00								
Secretary		х	2	2			0	0	0
(10)Karl Bruggen	4.00								
Treasurer		х	2	2			0	0	0
(11)									
<u>(12)</u>									
<u>(13)</u>				+					
<u>(14)</u>									

Part	VII Section A. Officers, Directors, T	rustees,	Key I	Emp	olo	yee	s, an	d F	lighest Comp	ensated Emp	loyees	(conti	nued)
						(C)							
	(A) (B) Name and title Average hours per week			(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/	(E) Reportable compensation from related organizations (W-2/	со	(F) Estimated amou of other compensation from the	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	orga	inization a	
<u>(15)</u>													
<u>(16)</u>													
<u>(17)</u>													
<u>(18)</u>													
<u>(19)</u>													
(20)													
(21)							. (
(22)							1						
(23)_													
(24)_													
(25)													
1b	Subtotal	ion A						•					
d	Total (add lines 1b and 1c)								81,077	0			0
2	Total number of individuals (including but n reportable compensation from the organiza		thos	e lis	ted	abo	ove) w	/ho	received more th	nan \$100,000 of			•
	reportable compensation from the organiza	IIIOII										Yes	0 No
3	Did the organization list any former officer, direct		•				-		•				
4	employee on line 1a? If "Yes," complete Schedu For any individual listed on line 1a, is the sum of re										3		X
	organization and related organizations greater th	•	•					•					
_	individual										4		х
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	•		-			-				5		х
Secti	on B. Independent Contractors	, ,											
1	Complete this table for your five highest co- compensation from the organization. Report	-										tav ve	ar
	(A)	it compens	alion	וטו נו	116	Jaic	iluai j	ycai	(B)	within the organ	(C)	ian ye	zai.
	Name and business addres	SS							Description of service	es	Compens	sation	
2	Total number of independent contractors (in received more than \$100,000 of compensa						ose li	sted	d above) who				
EEA	Toocived more than \$100,000 or compensa	aon nom t	ie org	ui IIZ	auc	/11					Forr	n 990 (2	2023)

		Check if Schedule O contains a respon	ise or note to any I	ine in this Part V	'III		[
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	1a b c d e f g h	Federated campaigns	Business Code 230000	900,073	900,073		
Prograi Re		All other program service revenue		900,073			
	3 4 5 6a	Investment income (including dividends, interest other similar amounts)	ceeds	4			4
	С	Less: rental expenses 6b Rental income or (loss) 6c Net rental income or (loss)					
evenue	7a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(ii) Other				
Other Re	8a	, · · · · · · · · · · · · · · · · · · ·	Ba Bb				
	9a b	Gross income from gaming activities. See Part IV, line 19	da Db				
	b	Less: cost of goods sold	Da Db				
Miscellanous Revenue	b c	Rebate and Other Misc Fee Coverage Income All other revenue	Business Code 900099 900099	2,413 1,193	2,413 1,193		
2	е	Total. Add lines 11a-11d		3,606			
	12	Total revenue. See instructions		903,683	903,679	0	4

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).

000	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 7b,	Total expenses	Program service	Management and	Fundraising					
	0b, and 10b of Part VIII.		expenses	general expenses	expenses					
1	Grants and other assistance to domestic organizations									
_	and domestic governments. See Part IV, line 21									
2	Grants and other assistance to domestic									
_	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and									
	foreign individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	81,077	72,969	4,054	4,054					
6	Compensation not included above to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	183,252	180,660	1,296	1,296					
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)									
9	Other employee benefits	259	259	7						
10	Payroll taxes	20,383	18,345	1,019	1,019					
11	Fees for services (nonemployees):									
а	Management									
b	Legal									
С	Accounting	16,627		16,627						
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25, column									
	(A), amount, list line 11g expenses on Schedule O.)	298,486	298,486							
12	Advertising and promotion	18,563			18,563					
13	Office expenses	33,887	10,926	4,962	17,999					
14	Information technology									
15	Royalties									
16	Occupancy	100	100							
17	Travel	646	323		323					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	13,112	13,112							
20	Interest	-	-							
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	4,715	2,143	2,572	·					
23	Insurance	5,891	5,891	-	·					
24	Other expenses. Itemize expenses not covered		. ,							
	above (List miscellaneous expenses on line 24e. If									
	line 24e amount exceeds 10% of line 25, column									
	(A), amount, list line 24e expenses on Schedule O.)									
а	Credit Card Processing	8,920	8,920							
b	Training Center Costs	2,864	2,864							
c	Corporate Filings	100		100						
d	Development Costs	4,315	4,315							
e	All other expenses	10,438	8,435	370	1,633					
25	Total functional expenses. Add lines 1 through 24e	703,635	627,748	31,000	44,887					
26	Joint costs. Complete this line only if the	, , , , , ,	32.,.10		,					
	organization reported in column (B) joint costs									
	from a combined educational campaign and									
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)									
	J									

Part X Balance Sheet

2 Savings and temporary cash investments 75,170 2 287,17 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 4 5 Loars and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loars and other receivables from other disqualified persons (as defined under section 4988(f(11)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7, Notes and loans receivable, net 8 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part Vi of Schedule D 10b 7,728 3,636 10c 1,06 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 15 15 7,857 14 5,73 15 15 15 15 15 15 15 15 15 15 15 15 15			Check if Schedule O contains a response or note to any line in thi	s Part X			
1					(A)		(B)
2 Savings and temporary cash investments					Beginning of year		End of year
3		1	Cash - non-interest-bearing		109,042	1	133,776
4 Accounts receivable, net 5 Loars and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 S		2	Savings and temporary cash investments		75,170	2	287,173
Section Complete		3	Pledges and grants receivable, net		3		
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part IV of Schedule D 10a 8,792 b Less: accumulated depreciation 10b 7,728 3,636 10c 1,06 11 Investments - publicly traded securities 11 12 Investments - other securities 9		4	Accounts receivable, net			4	
Controlled entity or family member of any of these persons 5		5	Loans and other receivables from any current or former officer, director,				
Section Sect			trustee, key employee, creator or founder, substantial contributor, or 35%				
### Under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 ### Notes and loans receivable, net 7 ### Notes and loans receivable, net 7 ### Notes and loans receivable, net 9 ### Prepaid expenses and deferred charges 9 ### Prepaid expenses and deferred charges 9 ### Deasts. Complete Part VI of Schedule D 10a ### B,792 ### B,792 ### Dasis. Complete Part VI of Schedule D 10b ### Notes and equipment cost or other basis. Complete Part VI of Schedule D 10b ### Notes accumulated depreciation 10b ### Notes accumulated securities 11b ### Notes accumulated 11b ### Not			controlled entity or family member of any of these persons			5	
Notes and loans receivable, net		6	Loans and other receivables from other disqualified persons (as defined				
Section Sect			under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
10a		7	Notes and loans receivable, net			7	
10a	sets	8	Inventories for sale or use	[8	
b Less: accumulated depreciation	Ass	9	Prepaid expenses and deferred charges	[9	
b Less: accumulated depreciation. 10b 7,728 3,636 10c 1,066 11 Investments - publicly traded securities		10a	Land, buildings, and equipment: cost or other				
11 Investments - publicly traded securities 11 12 12 12 13 Investments - other securities. See Part IV, line 11 13 13 14 Intangible assets 7,857 14 5,71 15 Other assets. See Part IV, line 11 15 15 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 195,705 16 427,72 17 Accounts payable and accrued expenses 126 17 37,97 18 Grants payable and accrued expenses 126 17 37,97 18 Grants payable 18 19 Deferred revenue 19 19 19 19 19 19 19 1			basis. Complete Part VI of Schedule D 10a	8,792			
11 Investments - publicly traded securities 11 12 12 13 Investments - other securities. See Part IV, line 11 13 14 Intangible assets 14 15,71 15 15 16 16 16 17 18 17,857 14 15,71 15 16 17 17,857 16 17 17,857 16 17 18 17 18 19 19 19 19 19 19 19		b	Less: accumulated depreciation 10b	7,728	3,636	10c	1,064
13 Investments - program-related. See Part IV, line 11 15 17,857 14 5,711 15 Other assets. See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 1,95,705 16 427,72 17 Accounts payable and accrued expenses 126 17 37,97 18 Grants payable 18 19 Deferred revenue 19 19 19 19 19 19 19 1		11	Investments - publicly traded securities			11	
14		12	Investments - other securities. See Part IV, line 11			12	
15 Other assets. See Part IV, line 11		13	Investments - program-related. See Part IV, line 11			13	
15 Other assets. See Part IV, line 11		14			7,857	14	5,714
17		15	Other assets. See Part IV, line 11			15	
17		16	Total assets. Add lines 1 through 15 (must equal line 33)		195,705	16	427,727
19 Deferred revenue		17				17	37,977
19 Deferred revenue		18	Grants payable			18	
21 Escrow or custodial account liability. Complete Part IV of Schedule D		19				19	
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		20	Tax-exempt bond liabilities			20	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
23 Secured mortgages and notes payable to unrelated third parties	Ś	22	Loans and other payables to any current or former officer, director,				
23 Secured mortgages and notes payable to unrelated third parties	litie		trustee, key employee, creator or founder, substantial contributor, or 35%				
23 Secured mortgages and notes payable to unrelated third parties	iabi		controlled entity or family member of any of these persons			22	
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		23	Secured mortgages and notes payable to unrelated third parties			23	
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties			24	
of Schedule D		25	Other liabilities (including federal income tax, payables to related third				
26 Total liabilities. Add lines 17 through 25			parties, and other liabilities not included on lines 17-24). Complete Part X				
Organizations that follow FASB ASC 958, check here							
and complete lines 27, 28, 32, and 33		26	Total liabilities. Add lines 17 through 25		6,003	26	37,977
and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 29,070 27 28 Net assets with donor restrictions 160,632 28 389.75			Organizations that follow FASB ASC 958, check here				
27 Net assets without donor restrictions 29,070 27 28 Net assets with donor restrictions 160,632 28 389,75	s		and complete lines 27, 28, 32, and 33.				
28 Net assets with donor restrictions	nce	27	Net assets without donor restrictions		29,070	27	
W ====================================	alaı	28	Net assets with donor restrictions		160,632	28	389,750
Organizations that do not follow FASB ASC 958, check here	d B		Organizations that do not follow FASB ASC 958, check here				
and complete lines 29 through 33.	-un		and complete lines 29 through 33.				
b 29 Capital stock or trust principal, or current funds	or F	29	Capital stock or trust principal, or current funds			29	
30 Paid-in or capital surplus, or land, building, or equipment fund	ets	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
31 Retained earnings, endowment, accumulated income, or other funds 31	Ass	31	Retained earnings, endowment, accumulated income, or other funds			31	
32 Total net assets or fund balances	Net A	32	Total net assets or fund balances		189,702	32	389,750
33 Total liabilities and net assets/fund balances		33	Total liabilities and net assets/fund balances		195,705	33	427,727

Form	1990 (2023) SonLight Power Inc	26-00076	36	P:	age 1
	rt XI Reconciliation of Net Assets	20-00076	36	1 0	age i
. u	Check if Schedule O contains a response or note to any line in this Part XI				П
1	Total revenue (must equal Part VIII, column (A), line 12)			903,	.683
2	Total expenses (must equal Part IX, column (A), line 25)	2		703,	
3	Revenue less expenses. Subtract line 2 from line 1			200,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		189,	
5	Net unrealized gains (losses) on investments				
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		389,	750
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				

EEA Form **990** (2023)

2c

3a

3b

х

the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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 O.

If the organization changed either its oversight process or selection process during the tax year, explain on

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer identification number

	nLight Power Inc 26-0007636									
Par	t I	Reason for Public Cha	rity Status. (Al	II organizations mus	st comple	ete this p	oart.) See instruction	ons.		
The o	rgar	nization is not a private foundation be	ecause it is: (For lir	nes 1 through 12, check o	only one bo	x.)				
1		A church, convention of churches,	or association of c	hurches described in se	ction 170	b)(1)(A)(i)				
2	Ш	A school described in section 170	(b)(1)(A)(ii). (Attac	ch Schedule E (Form 990	0).)					
3	Ш	A hospital or a cooperative hospital	l service organizat	ion described in section	170(b)(1)	(A)(iii).				
4	Ш	A medical research organization of	perated in conjunct	tion with a hospital desci	ribed in se	ction 170	(b)(1)(A)(iii). Enter the			
	_	hospital's name, city, and state:								
5	Ш	An organization operated for the be		r university owned or ope	erated by a	a governm	ental unit described in			
		section 170(b)(1)(A)(iv). (Complet	•							
6	Ц	A federal, state, or local government	•							
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)(•						
8	Н	A community trust described in sec					201 - 1 - 1 1 1			
9	Ш	An agricultural research organization						ege		
		or university or a non-land-grant co	liege of agriculture	(see instructions). Enter	tne name,	city, and s	tate of the college of			
10	П	university:	voc (1) mare than 3	22 1/20/ of its support fro	m contribit	tions mon	phorobin food, and groot	•		
10	Ш	An organization that normally received receipts from activities related to its	s exempt functions,	subject to certain excep	tions; and	(2) no mor	e than 33 1/3% of its	5		
		support from gross investment inco	me and unrelated b	business taxable income	(less secti	on 511 tax				
11	П	acquired by the organization after. An organization organized and ope			-		1)			
12	H		•				•	es of		
-	2 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.									
а										
		the supported organization(s) the				•	. ,	3		
		supporting organization. You r								
b		Type II. A supporting organiza	tion supervised or	controlled in connection	with its su	pported or	ganization(s), by havin	g		
		control or management of the s	upporting organiza	ation vested in the same	persons tha	at control o	r manage the supporte	d		
		organization(s). You must cor	nplete Part IV, Se	ctions A and C.						
С		☐ Type III functionally integrate	ed. A supporting or	rganization operated in o	connection	with, and	functionally integrated	with,		
		its supported organization(s) (s	see instructions). Y	ou must complete Par	t IV, Secti	ons A, D,	and E.			
d		Type III non-functionally inte	grated. A supporti	ing organization operate	d in conne	ction with	its supported organizat	ion(s)		
		that is not functionally integrate	d. The organization	n generally must satisfy a	distributio	n requirem	ent and an attentivenes	S		
		requirement (see instructions).	You must compl	ete Part IV, Sections A	and D, an	d Part V.				
е		Check this box if the organization				• • •	I, Type II, Type III			
		functionally integrated, or Type	III non-functionally	integrated supporting of	rganizatior).				
f		nter the number of supported organ								
g		rovide the following information abou		Ĭ ,						
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10					Amount of support (see	
				above (see instructions))	docum		instructions)		structions)	
					Yes	No	_			
					162	INO				
A)										
B)										
C)										
D)										
E)										
Cotol										

SonLight Power Inc 26-0007636 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	359,256	641,625	479,723	762,568	900,069	3,143,241
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	359,256	641,625	479,723	762,568	900,069	3,143,241
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly				A		
	supported organization) included on						
	line 1 that exceeds 2% of the amount			4			
	shown on line 11, column (f)						4,681
6	Public support. Subtract line 5 from line 4.						3,138,560
	on B. Total Support	1				1	
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	359,256	641,625	479,723	762,568	900,069	3,143,241
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources	203	67	51	9	4	334
9	Net income from unrelated business	*					
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets	W 7 Y					
	(Explain in Part VI.)	4,322	3,091		37	5,102	12,552
11	Total support. Add lines 7 through 10						3,156,127
12	Gross receipts from related activities, etc.					12	
13	First 5 years. If the Form 990 is for the o	•			•	•	, , ,
	organization, check this box and stop her						
	on C. Computation of Public Suppo						
14	Public support percentage for 2023 (line 6					14	99.44 %
15	Public support percentage from 2022 Sch					15	99.57 %
16a	33 1/3% support test - 2023. If the organ						
	box and stop here. The organization qua	•		•			_
b	33 1/3% support test - 2022. If the organ						
	this box and stop here. The organization	•		•			_
17a	10%-facts-and-circumstances test - 20	_					
	10% or more, and if the organization mee						
	Part VI how the organization meets the fa			-	-		
	organization						_
b	10%-facts-and-circumstances test - 20	_					
	15 is 10% or more, and if the organization					-	-
	in Part VI how the organization meets the			-	•	-	pported
40	organization						
18	Private foundation. If the organization di						
	instructions						

26-0007636

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

Secti	on A. Public Support			•		•	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities fumished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3			4			
	received from disqualified persons						
b	Amounts included on lines 2 and 3			^			
~	received from other than disgualified) -		
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
Ū	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	(0)	(0,1000	(0, _ 0 _ 1	(.,,	(0) = 0 = 0	(7)
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the or	rganization's fir	rst, second, thi	rd, fourth, or fi	fth tax year as a	section 501	c)(3)
	organization, check this box and stop her						
Secti	on C. Computation of Public Support						
15	Public support percentage for 2023 (line 8	3, column (f), d	ivided by line 1	13, column (f))		15	%
16	Public support percentage from 2022 Sch	iedule A, Part I	II, line 15 .			16	%
Secti	on D. Computation of Investment In	come Percei	ntage				
17	Investment income percentage for 2023 (line 10c, colum	nn (f), divided b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2022					18	%
19a	33 1/3% support tests - 2023. If the orga	inization did no	ot check the bo	x on line 14, a	nd line 15 is mo	ore than 33 1/	3%, and line
	17 is not more than 33 1/3%, check this b	ox and stop h	ere. The orgar	nization qualifie	es as a publicly	supported or	ganization 🗌
b	33 1/3% support tests - 2022. If the organizat	ion did not check	k a box on line 1	4 or line 19a, an	d line 16 is more	than 33 1/3%,	and
	line 18 is not more than 33 1/3%, check this bo	x and stop here	. The organizati	on qualifies as a	publicly supporte	ed organization	
20	Private foundation. If the organization di	d not check a	box on line 14,	19a, or 19b, o	heck this box a	nd see instru	ctions

Part IV **Supporting Organizations**

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

S

ecti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
-	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
Ü	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If</i>			
∓ a	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	− a		
b	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
_	Did the organization support any foreign supported organization that does not have an IRS determination	40		
С	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$			
		40		
5 0	purposes. Did the organization add substitute or remove any supported organizations during the tay year? If "Yea."	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or	_		
_	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line	_		
	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons, as defined in section 4946 (other than foundation managers and organizations			
	described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
I0a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

10b

determine whether the organization had excess business holdings.)

Part I	Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
		11a		
	· · · · · · · · · · · · · · · · · · ·	11b		
	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
		11c		
Section	n B. Type I Supporting Organizations		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		162	NO
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported	•		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	n C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	n D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
		2		
	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_		
Section	supported organizations played in this regard. n E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	inst	ructio	ne)
a	☐ The organization satisfied the Activities Test. <i>Complete line 2</i> below.	,,,,	uouo	113).
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruct	ions).		
	Activities Test. Answer lines 2a and 2b below.	[Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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

EEA Schedule A (Form 990) 2023

a Excess from 2019
b Excess from 2020
c Excess from 2021
d Excess from 2022
e Excess from 2023

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Secti	on D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish ea	xempt purposes		1		
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed			
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organ	izations	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required)	 provide details in Part 	VI)	5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which	the organization is resp	onsive			
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2023 from Section C, line 6			9		
_10	Line 8 amount divided by line 9 amount			10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023	ns	(iii) Distributable Amount for 2023	
1_	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023					
	(reasonable cause required - explain in Part VI). See					
	instructions.					
3	Excess distributions carryover, if any, to 2023					
a	From 2018					
b	From 2019					
C	From 2020					
d	From 2021					
е	From 2022					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2023 distributable amount					
i	Carryover from 2018 not applied (see instructions)					
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2023 from					
	Section D, line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2023 distributable amount					
C	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2023, if					
	any. Subtract lines 3g and 4a from line 2. For result					
	greater than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2023. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2024. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					

Schedule A (F	Form 990) 2023 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b,
	3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	illes 2, 3, and 6. Also complete this part for any additional information. (See instructions.)
-	
	<u> </u>

Schedule B (Form 990)

Schedule of Contributors

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

SonLight Power Inc 26-0007636 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 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 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).

SCHEDULE D (Form 990)

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.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name o	the organization		Employer identification number				
SonLi	ght Power Inc		26-0007636				
Pai	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds or Ac	counts				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line 6.					
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in	n writing that the assets held in donor advised	d				
	funds are the organization's property, subject to the organization	zation's exclusive legal control?					
6	6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used						
	only for charitable purposes and not for the benefit of the de	onor or donor advisor, or for any other purpos	e				
	conferring impermissible private benefit?						
Part	Part II Conservation Easements						
	Complete if the organization answered "Yes"	on Form 990, Part IV, line 7.					
1	Purpose(s) of conservation easements held by the organization	ation (check all that apply).					
	Preservation of land for public use (for example, recreat	tion or education) Preservation of a	historically important land area				
	Protection of natural habitat	Preservation of a	certified historic structure				
	Preservation of open space		•				
2	Complete lines 2a through 2d if the organization held a qua	lified conservation contribution in the form of	a conservation				
	easement on the last day of the tax year.		Held at the End of the Tax Year				
а	Total number of conservation easements						
b	Total acreage restricted by conservation easements		2b				
С	Number of conservation easements on a certified historic s	structure included on line 2a	2c				
d	Number of conservation easements included on line 2c, ac						
	on a historic structure listed in the National Register $\cdot \cdot \bullet$.						
3	Number of conservation easements modified, transferred, a	released, extinguished, or terminated by the	organization during the				
	tax year						
4	Number of states where property subject to conservation e						
5	Does the organization have a written policy regarding the p						
_	violations, and enforcement of the conservation easements						
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing conserv	vation easements during the year				
_							
7	Amount of expenses incurred in monitoring, inspecting, har	idling of violations, and enforcing conservation	on easements during the year				
•	——————————————————————————————————————		(4)(D)(;)				
8	Does each conservation easement reported on line 2d abo						
•	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conserve	•					
	sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements	ne organization's ilitaricial statements that des	scribes trie				
Par		s of Art Historical Treasures or (Other Similar Assets				
ı uı	Complete if the organization answered "Yes"	•	other ommar Assets				
1a	If the organization elected, as permitted under FASB ASC	· · · · · · · · · · · · · · · · · · ·	d balance sheet works				
	of art, historical treasures, or other similar assets held for p	•					
	service, provide in Part XIII the text of the footnote to its fin						
b	If the organization elected, as permitted under FASB ASC						
	art, historical treasures, or other similar assets held for pub						
	provide the following amounts relating to these items:		,				
	(i) Revenue included on Form 990, Part VIII, line 1		\$				
	(ii) Assets included in Form 990, Part X						
2	If the organization received or held works of art, historical to		gain, provide the				
	following amounts required to be reported under FASB AS		- ,				
а	Revenue included on Form 990, Part VIII, line 1		\$				
b	Assets included in Form 990, Part X						

Par	t III Organizations Maintaining Co	ollections of Art, His	storical Treasures,	or Other Similar Ass	ets (cc	ntin	ued)
3	Using the organization's acquisition, accession,	, and other records, check	any of the following that n	nake significant use of its			
	collection items (check all that apply):						
а	☐ Public exhibition	d	Loan or exchange p	rogram			
b	Scholarly research	е	Other				
С	Preservation for future generations						-
4	Provide a description of the organization's colle	ections and explain how the	ey further the organization	n's exempt purpose in Part			
	XIII.						
5	During the year, did the organization solicit or re	eceive donations of art, his	torical treasures, or other	similar			
	assets to be sold to raise funds rather than to b	e maintained as part of th	e organization's collectior	1?	Yes		No
Par	t IV Escrow and Custodial Arrang						
	Complete if the organization an	swered "Yes" on For	rm 990, Part IV, line	9, or reported an amo	unt on	Forn	n
	990, Part X, line 21.			·			
1a	Is the organization an agent, trustee, custodian	or other intermediary for co	ontributions or other asse	ts not			
	included on Form 990, Part X?				Yes		No
b	If "Yes," explain the arrangement in Part XIII ar	nd complete the following to	able.				
				Amo	unt		
С	Beginning balance			. 1c			
d	Additions during the year			. 1d			
е	Distributions during the year			. 1e			
f	Ending balance			. 1f			
2a	Did the organization include an amount on Form	n 990, Part X, line 21, for e	scrow or custodial accou	nt liability?	Yes		No
b	If "Yes," explain the arrangement in Part XIII. C	Check here if the explanation	on has been provided on F	Part XIII	<u></u>		
Par	t V Endowment Funds						
	Complete if the organization an	iswered "Yes" on Foi	rm 990, Part IV, line	10.			
		(a) Current year (b) F	Prior year (c) Two years	back (d) Three years back	(e) Four	years b	ack
1a	Beginning of year balance						
b	Contributions						
С	Net investment earnings, gains, and						
	losses						
d	Grants or scholarships						
е	Other expenditures for facilities and						
	programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the current	t year end balance (line 1g	, column (a)) held as:				
а	Board designated or quasi-endowment	%					
b	Permanent endowment%						
С	Term endowment %						
	The percentages on lines 2a, 2b, and 2c should	l equal 100%.					
3a	Are there endowment funds not in the possess	sion of the organization that	t are held and administere	ed for the	_		
	organization by:					Yes	No
	(i) Unrelated organizations?				3a(i)		
	(ii) Related organizations?				3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ons listed as required on S	Schedule R?		3b		
4	Describe in Part XIII the intended uses of the o	organization's endowment f	funds.				
Par	t VI Land, Buildings, and Equipm						
	Complete if the organization an	swered "Yes" on For	rm 990, Part IV, line	11a. See Form 990, F	art X, li	ne 1	0.
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book	value	
		(investment)	(other)	depreciation			
1a	Land						
b	Buildings						
С	Leasehold improvements						
d	Equipment		8,792	7,728		1,	064
е	Other						
Total.	Add lines 1a through 1e. (Column (d) must equ	ıal Form 990, Part X. line	10c. column (B)			1.	064

	Complete if the organization answered Tes of For	iii 550, i ait iv, iiii	c 116. Occ 1 dilli 330, 1 alt A, iiic 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)			

Part IX Other Assets

Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)).

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)

Total. (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 inco	me taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) n	nust 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	<u> </u>	-	Return
	Complete if the organization answered "Yes" on Form 990, P		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С.	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	_
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	4.5
C	Add lines 4a and 4b		4c 5
5 Part			
Ган	Complete if the organization answered "Yes" on Form 990, P		i Netuiii
1	· •		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
C	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).		5
Part			
Provide	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, II	ines 1b and 2b; Part V, line 4; F	Part X, line
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	ny additional information.	
	*		

EEA Schedule D (Form 990) 2023

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

26-0007636 SonLight Power Inc 01. Form 990 governing body review (Part VI, line 11) Draft is distributed to board for review. 02. Conflict of interest policy compliance (Part VI, line 12c) Policy and enforcement is reviewed annually or as needed. 03. CEO, executive director, top management comp (Part VI, line 15a) Board reviews and approves salaries annually. 04. Governing documents, etc, available to public (Part VI, All governing documents are made available upon request (Part IX, line 11g) 05. List of other fees for services expenses Equipping Project Expenses \$147814 Mission Partner Project Expenses Project Tools \$3996 Exploratory Efforts \$2498 Team and Site Costs \$2911