Agency	Cenikor
Program	Youth Recovery Community
San Marcos Service Address	direct to client location
Requested	\$15,000
Recommended	\$7,500

	Cenikor
Application Completeness Check for HSAB	Youth Recovery Community
Questions	· · · · · · · · · · · · · · · · · · ·
Are all questions answered?	Yes
Is the application signed? (this is a certification)	Yes
Does the program have measurable outcomes?	Yes
Is the agency a Human Services Agency?	Yes
Is the agency overseen by a Board of Directors?	Yes
Required Attachments	
BUDGETS	
Agency budget for current fiscal year	Yes
2. Agency budget proposed for next fiscal year	Yes
3. Program budget for current fiscal year	Yes
4. Program budget proposed for next fiscal year	Yes
5. Budget showing the exact uses of the HSAB funding	Yes
BOARD OF DIRECTORS INFORMATION	
6. Board of Directors membership roster	Yes
7. Board of Directors Meeting Attendance Record for current year	Yes
8. Board of Directors City of Residence	Yes
9. Board of Directors membership criteria	Yes
ORGANIZATION INFORMATION	
10. Organizational chart with names and titles of staff	Yes
11. Current IRS Form 990, pages 1 and 2 (not required for churches)	Yes
12. Non-discrimination policy statement	Yes
Preferred Attachments - 3 Letters of Support	
Letters of support from members of the San Marcos Community	Yes
Attachments if Applicable	
Latest audit or CPA signed review, if applicable	Yes
Policies and Procedures for the proposed Program, if available	Yes
Note: We are not requiring Texas Secretary of State registration	



City of San Marcos Human Services Grants FY 2025 Application

I. SUMMARY INFORMATION

Please spell out organization name and program name completely, without acronyms.

Applicant Organization: Cenikor

Contact Name: Carla Merritt LMSW, CPS

Contact E-Mail Address: cmeritt@cenikor.org Website: www.cenikor.org

Mailing Address: 1901 Dutton Drive, suite E San Marcos, Texas 78666

San Marcos Service Address for this Program: 5316 Old Bullard Road, Texas 75701

Who is authorized to execute program documents? Bill Bailey, Cenikor President and CEO

Program Name: Youth Recovery Community

Amount of Funds Requested: \$15,000

What percentage of the cost of this program is requested as funding through this application-Five percent of the cost of this program is requested through this application.

II. QUESTIONS

All questions must be answered. Please type your answers.

OVERVIEW

- 1. What is the agency's or organization's mission? Cenikor. A Place for Better Health and Better Lives.
- 2. Briefly summarize the program for which funding is being requested and the services it provides. Cenikor's Youth Recovery Community (YRC) Program serves youth and young adults ages 13-21 and family members to promote recovery from substance use and instill positive coping skills for healthy mental health. Participants enrolled in the YRC Program receive individual mentoring, group services, and are encouraged to participate in scheduled fun and sober events during the school year and summer months. Services for the youth can occur either at schools, in the community or at the YRC location. The fun and sober events also occur at the YRC location for game and movie nights, bowling, picnic and games at the park. These activities provide youth a chance to engage in healthy fun with their peers and to learn skills centered around recovery. A lengthy partnership with Texas State University ensures a weekly collegiate group is held at the Student Health Center for students in recovery or who are looking for a pathway to recovery. Partnerships with Hays County Juvenile Probation, Hays County Detention Center, and the City of San Marcos Juvenile Case Coordinator with the Municipal Court also ensure youth receive services.

COMMUNITY NEED AND JUSTIFICATION - 20 POINTS

- 1. Describe in detail the need for this program in San Marcos.
 - The rapid growth of the City of San Marcos has resulted in an increased number of families living in the community who are in desperate need of Cenikor Programs. The number of adolescents experimenting with tobacco/vaping, alcohol, marijuana and prescription drugs at younger ages is on the rise. Research has established that a human's brain is not fully developed until the age of 25. The use of substances during rapid growth in an adolescent's life can lead to the inability to succeed in school, poor decision making, engage in violence, and further substance use problems can occur as an adult. Each service our YRC Peer Recovery leaders deliver has a positive impact on an adolescent and family creating a means for recovery. Recovery for youth provides an opportunity for wellness, establishing a support system, positive coping skills, healthy decision making and graduating on time from high school. Recovery also results in adolescents and young adults establishing goals for the present, their future education, employment and equipped with skills to move forward to the next chapter in their lives.
- 2. Has the need for this program been increasing in recent years? Yes, the need for the YRC program has increased. The YRC team has seen a significant rise over the last four years of referrals to the YRC program. The introduction of more harmful substances in the San Marcos community is prevalent. The fentanyl crisis has been an alarming problem that families, schools, and other community partners are faced with. The Cenikor YRC team is trained in the Peer Recovery model and prepared to serve the youth and family members needs in San Marcos.
- 3. Client Information

Definitions:

<u>Direct Client</u> - individuals or families immediately affected or personally served by the helping agency.

Questions:

- a. Describe the direct clients for this program.

 Direct clients are youth and young adults ages 13-21, parents, and other adults in the family.
- b. How is the program market to direct clients? How do you find these clients? The YRC program has provided eight years of services to the youth and families of San Marcos. Collaboration with existing community partners such as Texas State University, Juvenile Probation and other community partners provide referrals, and the reputation for professional and quality services provided by the YRC market the program. Attendance at community events offer an opportunity to interact with youth and families and distribute information about the YRC services. The Cenikor Marketing Department offers the YRC program the capacity to promote YRC through the visibility of social media that appeals to youth and young adults.
- c. Expected total annual unduplicated direct clients who are City of San Marcos residents:

 The expected total annual unduplicated youth and families who are City of San Marcos residents to be served potentially are 100 youth and 25-30 families.

IMPLEMENTATION - 15 POINTS

- How exactly will these funds be used?
 The YRC program is funded by the Health and Human Service Commission (HHSC). Per HHSC organizations are to secure funding from the community served to meet the required 5 percent match dollars.
- 2. What specific, measurable outcomes or results do you hope to achieve with this program?

 Measurable monthly and yearly outcomes are the number of youths, young adults, and family members served as established by HSCC. The outcome requirement is to meet the monthly and yearly measurable outcomes. The long-term outcome for youth in the YRC program is to reduce adolescent and young adult substance use in San Marcos. Measurable outcomes for family members are to receive education on stress management and acquire positive coping skills to improve their own mental health. A healthy parent practicing supportive parenting skills are more likely to engage their child in a supportive recovery process.

 Parents in need of their own substance use treatment are given support and access to local therapists

And Cenikor substance treatment options.

- 3. List the title of each position for which funding is requested and the activities associated with those positions. There are no positions for funding being requested. The funding is to provide the Health and Human Services Commission requirement of the 5 percent match dollars required of Cenikor.
- 4. If funding is not available at the requested amount, what is the minimum Human Services Grant funding needed to be able to run this program? If full funding is not available at the requested amount, the minimum needed to meet the requirement of the match dollars would be half of what is requested.

IMPACT AND COST EFFECTIVENESS - 25 POINTS

- 1. Programs can provide value by deeply impacting the lives of a few, with effects that may ripple through generations, or by providing smaller but meaningful impact to a larger group. Describe in detail the impact this program will have on the identified need and on San Marcos residents.

 The YRC team provides an opportunity for adolescents and young adults to focus on their mental health, social and emotional needs and learn and practice positive coping skills. Adolescents, and Texas State University students receive year around services both individually and through weekly groups by trained Peer Recovery leaders. The YRC Family Coordinator services includes individual sessions, group sessions, education, resources, and support to family members. The fun and sober events held throughout the year builds a recovery community that encourages living a healthy lifestyle. Adolescents, young adults and family who participate in the YRC program have a safe community for learning, support, and connection with others to grow and develop in their recovery journey.
- Discuss the amount of overhead compared to program costs.
 The Prevention program is 10 percent overhead comparted to 90 percent of cost of the program.
- 3. Provide a brief description of other funding sources, volunteers, or in-kind donations that are expected to be used with this program.
 - The Health and Human Service Commission grants fund almost the entirety of the program. However, the match dollars are left up to Cenikor to secure. Other funding sources differ from year to year depending on local resources capacity through Hays County and United Way.
- 4. What has your organization done in the past two years to raise different funding for this program? The Cenikor San Marcos YRC began has a pilot program funded by HHSC many years ago. The success of the YRC resulted being awarded another five years of funding and expansion to two other regions in Texas. In the Fall of 2024 we will once again write for continued funding through HHSC for the San Marcos area and expansion. The YRC has had eight years of successful funding and exhibiting excellence of programming and fiscal compliance.

COMMUNITY SUPPORT - 10 POINTS

- Please submit 3-5 letters of reference that indicate strong local support for the program and the agency's ability to implement it as described in the application. See attached.
- How is the Board of Directors selected?
 The Cenikor Board are unpaid volunteer positions who are business leaders and support the Cenikor Mission,
 Visions, and Core Values. The Cenikor Board provides fiduciary and operational insight from their many years of experience.
- 3. How often does the Board meet?

 The Cenikor Board of Directors meets as a quorum each quarter. Presentations and updates from Cenikor leadership provide an opportunity to share and seek guidance from the board on present and future direction and decision making. The Board Committees meet quarterly, or as needed to achieve committee goals.
- 4. What actions do Board members take to support the programs of the agency or organization?

 The Board members provide monetary support, as well as engagement with community outreach, fundraising activities, and building relationships with other supporters and referral partners.
- 5. How many volunteers does your agency or organization have and how many hours do they spend on the program requesting funding? Due to confidentiality and the nature of the YRC services we are not able to utilize volunteers.

COUNCIL PRIORITIES - 30 POINTS

- 1. How long has this program served San Marcos residents? (10 points if at least 2 years) The YRC program has served San Marcos for over 8 years.
- 2. Does the agency have an office in San Marcos? (10 points if yes) The YRC moved its office to Buda. This was due to the increased request of referrals from Hays CISD, Kyle, Buda, and Travis County. The YRC team continues to serve San Marcos in a large capacity because of the valued established partnerships developed over many years and partners with the Prevention team on events with in the community.
- 3. Describe how this funding creates an increase in services or an increase in the number of people served. (10 points)_The funding received from the City of San Marcos allows the YRC Program to continue by meeting the HHSC contract requirement to seek community match dollars. The number of services requested by the community continues to rise with the increasing population of Texas State University students and the number of youth in the judicial system specifically youth who are on probation, or are in the detention system.

II. FUNDING RESTRICTIONS

By signing this application I certify the following to be true:

- 1. All Human Services Grant funding will be spent on San Marcos residents, except for school-based programs, in which case it may be spent within the San Marcos Consolidated Independent School District boundary.
- 2. Funding requested is not more than 50% of the total funding for the agency.
- 3. Funding will not be used to fund more than 20% of a full time position.
- 4. Agency has been in existence for at least 2 years. (This can include serving communities other than San Marcos.)

SUBMITTED AND APPROVED BY:	7-29.200
Signature	Date
Carin Memit	
Printed Name	
Presenten & The Director	
Title	



HUMAN SERVICES ADVISORY BOARD GRANT PROGRESS REPORT

Agency Name:	Cenikor Foundation
Program Name:	Youth Recovery Community
Program Year:	2023

Please submit one report by October 15, 2023 for the period January 1, 2023 - September 30, 2023.

Project Status

Please provide a written description of actions taken this period to help achieve your program goals.

It has been a very exciting year for our Cenikor Youth Recovery Community. Finally, being released from COVI-19 restrictions the year allowed our Peer Recovery Leaders to enter schools, enhance relationships with community partners, and be present at community events to serve youth and their families in need of Recovery Support Services. The Youth Recovery Community (YRC) program serves youth ages 13-21, and their family members who struggle with substance use and mental health challenges. Participants of the YRC program receive individual mentoring, group sessions, and an opportunity to belong to a community that promotes health and wellness through fun and sober events. Families benefit from the YRC program by providing resources for parents that align with the youth's current services. The goal was to serve youth and family members in addition to adhering to the monthly program measures established by Health and Human Services Commission. Cenikor's YRC program measures over twenty different youth outcomes within eight outcome domains, including academic success, arts and recreation, community involvement, cultural competency, life skills, positive life choices, positive core values, and sense of self. For the funding period the number of youth served was 1,215 youth and 144 family members which resulted in meeting the metrics goal. The Youth Recovery Community Program funded by the Health and Human Services Commission (HHSC) is also subject to annual program audits. An annual audit was held and no findings for the YRC program were found. Daily our Peer Recovery Leader and Family Coordinator served youth and families in the San Marcos Community to provide education, information, and support. The services provided hope for youth and families who have encountered trauma, and are in need of tools to cope with trauma, and life's challenges other than turning to unhealthy substances. These tools through individual and groups sessions, and the ability to be heard and seen along with learning how to have fun without substances all made for an amazing year of serving the San Marcos community.

Certification:	
I certify that to the best of my knowledge and belief the information belief the information of the best of my knowledge and belief the information of the best of my knowledge and belief the information of the best of my knowledge and belief the information of the best of my knowledge and belief the information of the best of my knowledge and belief the information of the best of my knowledge and belief the information of the best of my knowledge and belief the information of the best of my knowledge and belief the information of the best of my knowledge and belief the information of the best of my knowledge and belief the information of the best	nation reported in this Quarterly Progress and
Cull 14110 InavSONCS	1072-2023
Carla Mernitt	Creniker Prevention / Manager
Printed name	Title

Cenikor Foundation Budgetary Comparative Income Statement

_	Fiscal Year 2025	Fiscal Year 2024
Revenue		
Cash Contributions	1,177,754	1,173,345
Event Income	129,000	144,000
Direct Government Aid	149,837	147,723
Insurance - Commercial	7,693,848	5,637,895
Insurance - Medicaid	5,355,377	5,114,005
Insurance - VA	5,093,720	5,857,676
Third Party Payers - Other Providers	4,059,057	2,704,252
Third Party Payers - Private Pay	319,191	232,807
Rental Income	2,027,064	1,987,529
Government Grant Revenue - HHSC	14,750,025	14,468,905
Government Grant Revenue - Other Other Income	2,105,857 685,640	2,444,581 623,800
Total Revenue	43,546,370	40,536,518
Expenses		
Advertising	459,600	360,000
Accounting	140,480	99,776
Bad Debts & Losses	1,501,411	1,381,430
Computer Support	493,660	488,299
Employee Benefits	1,611,086	1,645,221
Household Supplies	103,570	108,545
Human Resources	355,017	268,047
Lawncare Supplies	127,588	111,083
Insurance - Workers Comp.	100,384	121,058
Insurance - Liability	483,775	481,700
Insurance - Property	532,472	458,485
Insurance - Automoblies	259,920	250,264
Kitchen Supplies	129,351	128,497
Medical Expense	197,140	188,664
Office Expense	179,041	166,443
Payroll Taxes	1,994,747	1,845,156
Parking, Fuel & Tolls Expense	53,137	77,550
Pension Expense	801,650	748,753
Professional & Legal Fees	2,041,484	1,894,376
Professional Training	274,036	271,783
Postage Expense	10,701	9,383
PR, Printing & Member Fees	298,150	251,982
Rental & Lease	335,537	303,874
Repairs & Maintenance	611,971	554,456
Resident Expense - Clinical	39,612	25,959
Resident Expense - Cloth & Sun	79,440	72,195
Resident Exp - Edu/Job Ready	5,050	5,100
Resident Expense - Food	1,244,677	1,266,117
Resident Expense - Licensure	120,200	20,830
Resident Expense - Other	138,290	168,608
Resident Expense -Lab Analysis	111,428	102,783
Salaries	22,885,331	21,653,181
Relocating Allowance	10,000	16.080
Shipping & Couriers	15,864	16,980 152 195
Telephone Employee Meals & Recognition	130,189	152,195 34,590
Travel - Board	39,485 40,000	34,590 40,000
Travel-Staff	243,551	257,535
Travel-Outreach/Bus Dev	65,400	55,100
Travel-Resident	63,227	37,195
Utilities - Electricity	706,430	690,277
Utilities - Natural Gas	121,542	129,795
Utilities - Water & Wastewater	419,190	356,865
Utilities - Waste Disposal	68,443	75,950
Vehicle Maintenance	40,829	47,690
Other Expense	40,829	47,090
Cost of Goods Sold - Events	33,000	51,000
Total Expenses	39,596,886	37,474,770
EBITDA	3,949,483	3,061,747
Interest Expense	562,829	572,974
Property/UBIT Taxes	141,400	162,000
Depreciation/Amortization	1,661,098	1,507,202
Change in Net Assets	1,584,157	819,571

San Marcos Prevention/YRC Budgetary Comparative Income Statement

	Fiscal Year 2025	Fiscal Year 2024
Revenue		
Cash Contributions	3,250	5,000
Government Grant Revenue - HHSC	831,687	893,912
Government Grant Revenue - Other	304,376	278,470
Other Income	0	0
Total Revenue	1,139,313	1,177,382
Expenses		
Computer Support	16,668	20,830
Employee Benefits	29,007	50,580
Household Supplies	0	660
Human Resources	7,640	7,040
Insurance - Workers Comp.	1,069	1,097
Insurance - Liability	888	1,080
Insurance - Property	8,748	156
Kitchen Supplies	0	0
Office Expense	9,854	9,704
Payroll Taxes	48,137	61,307
Parking, Fuel & Tolls Expense	0	0
Pension Expense	19,368	20,277
Professional & Legal Fees	24,144	24,144
Professional Training	6,198	10,050
Postage Expense	0	0
PR, Printing & Member Fees	16,950	18,550
Rental & Lease	89,760	80,820
Repairs & Maintenance	3,300	3,300
Resident Expense - Clinical	10,050	0
Resident Expense - Food	0	0
Resident Expense - Other	41,100	49,750
Salaries	687,663	681,188
Shipping & Couriers	0	0
Telephone	8,676	7,860
Employee Meals & Recognition	0	0
Travel-Staff	28,515	23,396
Travel-Outreach/Bus Dev	0	0
Travel-Resident	0	0
Utilities - Electricity	1,680	1,200
Other Expense	0	0
Total Expenses	1,059,415	1,072,989
EBITDA	79,898	104,393
Interest Expense	0	0
Depreciation/Amortization	0	1,665
Change in Net Assets	79,898	102,728
Facility Support Center (FSC)	79,898	85,542
Change in Net Assets After FSC	(0)	17,186

San Marcos Prevention/YRC Budgetary Comparative Income Statement

<u> </u>	Fiscal Year 2025	Fiscal Year 2024
Revenue		
Cash Contributions	2,437	5,000
Government Grant Revenue - HHSC	692,212	893,912
Government Grant Revenue - Other	266,992	255,970
Government Grant Revenue - City of San Marcos	30,000	22,500
Other Income	0	0
Total Revenue	991,641	1,177,382
Expenses		
Computer Support	13,212	20,830
Employee Benefits	25,243	50,580
Household Supplies	0	660
Human Resources	9,200	7,040
Insurance - Workers Comp.	943	1,097
Insurance - Liability	744	1,080
Insurance - Property	7,956	156
Kitchen Supplies	0	0
Office Expense	7,958	9,704
Payroll Taxes	41,904	61,307
Parking, Fuel & Tolls Expense	0	0
Pension Expense	17,839	20,277
Professional & Legal Fees	23,544	24,144
Professional Training	6,198	10,050
Postage Expense	0	0
PR, Printing & Member Fees	13,450	18,550
Rental & Lease	80,616	80,820
Repairs & Maintenance	2,880	3,300
Resident Expense - Clinical Resident Expense - Food	7,050 0	0 0
Resident Expense - Pood Resident Expense - Other	37,600	49,750
Salaries	598,627	681,188
Shipping & Couriers	0	001,100
Telephone	8,676	7,860
Employee Meals & Recognition	0,070	0
Travel-Staff	24,198	23,396
Travel-Outreach/Bus Dev	0	0
Travel-Resident	0	0
Utilities - Electricity	1,680	1,200
Other Expense	0	0
Total Expenses	929,518	1,072,989
EBITDA	62,123	104,393
Interest Expense	0	0
Depreciation/Amortization	0	1,665
Change in Net Assets	62,123	102,728
<u> </u>		
Facility Support Center (FSC)	62,123	85,542
Change in Net Assets After FSC	(0)	17,186

Cenikor Youth Recovery Community Budget HSAB Funding:

Proposed uses of the HSAB funding will consist of only using the funding amount for the Health and Human Services Commission match dollars.

Cenikor Foundation National Board of Directors

BOARD MEMBERS

John Marmaduke

Chairman

Amarillo, TX

Ralph Hawkins

Past Chairman

Dallas, TX

Bill Bailey

President & CEO

Houston, TX

Chris Nicosia

Treasurer

Corpus Christi, Texas

Pete Guilfoile

Secretary

Dallas, Texas

Alex Howard

Houston, Texas

Bentley Sanford

Houston, TX

Geoff Crabtree

San Antonio, TX

Abelino "Abel" Reyna

Waco, TX

Dr. Kelty Baker

Houston, TX

Rick Fountain

Pensacola, FL

Larry Hobbs

Waco, Texas

Willie Mount

Lake Charles, LA

Joy Schmitz, Ph.D.

Houston, TX

Michael D. Viator

Spring, Texas

Alonzo Harris

Dallas, Texas

Dr. Gail Vozzella

Houston, Texas

Sandy Klein

San Antonio, Texas

OFFICERS

Bill Bailey

President & CEO

Houston, Texas

Matt Kuhlman

Vice President, Chief Financial Officer

Houston, Texas

Kellee Webb

Vice President, Chief of Staff

Houston, Texas

Dan Reynolds

Assistant Vice President of Operations

Houston, Texas

George Asous

Sr Regional Director

Houston, Texas



Board of Directors Meeting Attendance Record FY2024

August 12, 2023

Attendance:

Mr. Ralpha Hawkins, John Marmaduke, Dr. Joy Schmitz, Alex Howard, Dr. Kelty Baker, Mr. Bentley Sanford, Mr. Rick Grinnan, Mr. Larry Hobbs, Mr. Rick Fountain, Mrs. Chris Nicosia, Mr. Geoffrey Crabtree, Mr. Mike Viator, Senator Willie Mount, and Mr. Bill Bailey.

November 4, 2023

Attendance:

Mr. Ralpha Hawkins, John Marmaduke, Dr. Joy Schmitz, Mr. Alex Howard, Dr. Kelty Baker, Mr. Bentley Sanford, Mr. Rick Grinnan, Mr. Rick Fountain, Mr. Geoffrey Crabtree, Mr. Mike Viator, Senator Willie Mount, Mr. Alonzo Harris, Chris Nicosia, Gail Vozzella and Mr. Bill Bailey.

February 10, 2024

Attendance:

Mr. Ralpha Hawkins, John Marmaduke, Dr. Joy Schmitz, Mr. Alex Howard, Dr. Kelty Baker, Mr. Bentley Sanford, Mr. Rick Grinnan, Mr. Rick Fountain, Mr. Larry Hobbs, Mr. Geoffrey Crabtree, Mr. Mike Viator, Senator Willie Mount, Mr. Alonzo Harris, Chris Nicosia, Dr. Gail Vozzella, Mr. Peter Guilfoile and Mr. Bill Bailey.

May 11, 2024

Attendance:

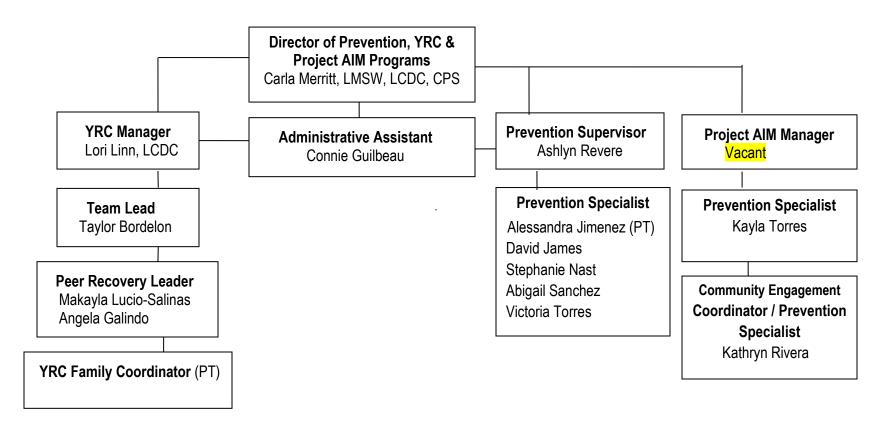
Mr. Ralpha Hawkins, John Marmaduke, Dr. Joy Schmitz, Mr. Alex Howard, Dr. Kelty Baker, Mr. Bentley Sanford, Mr. Rick Grinnan, Mr. Rick Fountain, Mr. Geoffrey Crabtree, Mr. Mike Viator, Mr. Abel Reyna, Senator Willie Mount, Mr. Alonzo Harris, Mr. Pete Guilfoile, Mrs. Chris Nicosia, Mr. Ralph Hawkins, Mr. Peter Guilfoile and Mr. Bill Bailey.



Membership criteria for the Cenikor Board consist of Business Leaders from a broad spectrum of industr	ries
who are able to volunteer their time to provide fiduciary and board governance duties.	

CENIKOR.ORG

Cenikor Foundation San Marcos (Region 7) 2024/2025 Organizational Chart



Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

30 , 20 <u>23</u> **20**

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

2022

OMB No. 1545-0047

Name (of filer				EI	N or SSN
	CENIKOR FOUN	DATION			'	76-0031861
Name a	and title of officer or person subject to	tax MAT	T KUHLMAN		•	
Par	t I Type of Return an					
Check Forms or 10 a which	the box for the return for which 5330 filers may enter dollars and below, and the amount on that	you are using cents. For all line for the ret enter -0-). But,	this Form 8879-TE and ente other forms, enter whole do turn being filed with this form , if you entered -0- on the ret	llars only. If you check n was blank, then leave urn, then enter -0- on th	the box on line e line 1b, 2b, 3b he applicable lin	e 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, a, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, the below. Do not complete more
1a	Form 990 check here	X b To	otal revenue, if any (Form 99	90, Part VIII, column (A), line 12)	₁₆ 39,181,956.
2a	Form 990-EZ check here	b To	otal revenue, if any (Form 99	90-EZ, line 9)		2b
3a	Form 1120-POL check here		otal tax (Form 1120-POL, lin			
4a	Form 990-PF check here	b Ta	ax based on investment ind	come (Form 990-PF, Pa	art V, line 5)	
5a	Form 8868 check here	b Ba	alance due (Form 8868, line	3c)		5b
6a	Form 990-T check here	<u></u> b То	otal tax (Form 990-T, Part III	, line 4)		6b
7a	Form 4720 check here	<u></u> b То	otal tax (Form 4720, Part III,	line 1)		7b
8a	Form 5227 check here	L b FM	MV of assets at end of tax	year (Form 5227, Item	D)	8b
9a	Form 5330 check here	L b Ta	ax due (Form 5330, Part II, li	ne 19)		9b
10a			mount of credit payment re			22) 10b
Par			Authorization of Office			
	penalties of perjury, I declare that	at 🔼 I am a	•	•	•	
of ent	ity)electronic return and accompany					at I have examined a copy of the
payme person	ial institution to debit the entry to han 2 business days prior to the ent of taxes to receive confidentianal identification number (PIN) as theck one box only I authorize LAPORTE,	payment (sett al information my signature	tlement) date. I also authoriz necessary to answer inquiri	e the financial institution es and resolve issues r	ons involved in related to the p nsent to electro	the processing of the electronic ayment. I have selected a nic funds withdrawal.
L	A lauthorize HAPORIE,	AFAC	ERO firm name		to en	ter my PIN 11489 Enter five numbers, but
			ENU IIIIII II IIIII			do not enter all zeros
	with a state agency(ies) regu on the return's disclosure co As an officer or person subje	lating charities nsent screen. ect to tax with	s as part of the IRS Fed/Sta respect to the entity, I will e	te program, I also auth nter my PIN as my sigr	norize the aforer	opy of the return is being filed mentioned ERO to enter my PIN ax year 2022 electronically filed gulating charities as part of the
	IRS Fed/State program, I will		on the return's disclosure of	•	agency(les) re	
	re of officer or person subject to tax	race No	uhlman			Date 2/19/2024
Par						
	s EFIN/PIN. Enter your six-digit e er (EFIN) followed by your five-dig	-			570005 Iter all zeros	
submi	fy that the above numeric entry is itting this return in accordance w ess Returns.			•		
ER0's	signature			Date		
	=		Must Retain This Form			_
			This Form to the IRS		ed to Do So	
LHA	For Privacy Act and Paperwork	Reduction A	ACT NOTICE, see instructions	S.		Form 8879-TE (2022)

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For the	2022 calendar year, or tax year beginning $\mathrm{JUL}1$, 2022 and ending	JUN 30, 2023	3
B	Check if applicable	C Name of organization	D Employer identif	ication number
	applicable			
	Addres change	CENIKOR FOUNDATION		
	Name change	Doing business as	**-**18	361
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/st	uite E Telephone numb	er
	Final return/	11931 WICKCHESTER LANE STE		
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	41,681,337.
	Amend		H(a) Is this a group	return
	Application	F Name and address of principal officer: TATT NOTITIAN	for subordinate	
	pendin		TX H(b) Are all subordinates	
ī	Tax-exe			a list. See instructions
J	Websit	e: WWW.CENIKOR.ORG	H(c) Group exempti	on number
K	Form of	organization: X Corporation Trust Association Other L Y		M State of legal domicile: $\mathbf{T}\mathbf{X}$
_	art I	Summary	·	
0	1	Briefly describe the organization's mission or most significant activities: CENIKOR	FOUNDATION PR	ROVIDES
Governance	:	DETOXIFICATION, SHORT-TERM RESIDENTIAL, (CONT	'D ON SCHEDUI	LE O)
rne	2	Check this box if the organization discontinued its operations or disposed of m	nore than 25% of its net a	assets.
ove.	: з	Number of voting members of the governing body (Part VI, line 1a)	з	15
প্ৰ		Number of independent voting members of the governing body (Part VI, line 1b)		15
	' I	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		796
Ζį	6	Total number of volunteers (estimate if necessary)		75
Activities	7a	Total unrelated business revenue from Part VIII, column (C), line 12		
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		42,627.
			Prior Year	Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)	21,444,221.	
nue	9	Program service revenue (Part VIII, line 2g)	13,851,272	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-13,795	
Œ	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-1,348,173	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	33,933,525	39,181,956.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	18,439,999	
Expenses	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 422,820.	0.	0.
xpe	b -	Total fundraising expenses (Part IX, column (D), line 25) 422,820.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	11,326,316.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	29,766,315.	
	19	Revenue less expenses. Subtract line 18 from line 12	4,167,210.	
0 S	SES		Beginning of Current Year	
Net Assets or	ਰ 20 ⁻	Total assets (Part X, line 16)	46,211,968.	
t As	21 ·	Total liabilities (Part X, line 26)	10,595,344.	
S.	22 ∣	Net assets or fund balances. Subtract line 21 from line 20	35,616,624.	38,788,077.
_	art II	Signature Block		
Un	der pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of r	ny knowledge and belief, it is
tru	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	
Si		Signature of officer	Date	
He	ere	MATT KUHLMAN, CFO		
		Type or print name and title	ID-t-	DTIN
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Paid		JOHN S. WILES, CPA	self-emplo	
		Firm's name LAPORTE, APAC	Firm's EIN	**-***8864
Us	e Only	Firm's address 111 VETERANS MEMORIAL BLVD., #600		
_		METAIRIE, LA 70005-4958	Phone no. 5 (04-835-5522
Ma	ay the IF	RS discuss this return with the preparer shown above? See instructions		X Yes No
		and I UA. For Department Poduction Act Notice, see the congrete instructions		Earm 990 (2022)

Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	CENIKOR: A PLACE FOR CHANGE PROVIDING A FOUNDATION FOR BETTER HEALTH
	AND BETTER LIVES.
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? Yes X No
3	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 \$ 1,554,658 • including grants of \$) (Revenue \$ 798,618 •
	RECOVERY HOUSING PROGRAM IN HOUSTON (TX), FORT WORTH (TX), CORPUS
	CHRISTI (TX), AND AMARILLO (TX); SERVING APPROXIMATELY 649 INDIVIDUALS
	DURING THE YEAR ENDING 6/30/23.
4b	(Code:) (Expenses \$ 24,184,209 · including grants of \$) (Revenue \$ 16,704,072 ·
	DETOXIFICATION, INTENSIVE & SUPPORTIVE RESIDENTIAL TREATMENT PROGRAMS
	IN WACO (TX), HOUSTON (TX), TYLER (TX), CORPUS CHRISTI (TX), AMARILLO
	(TX), AUSTIN (TX), DALLAS (TX), AND FARMINGTON (NM); SERVING
	APPROXIMATELY 11,199 INDIVIDUALS DURING THE YEAR ENDING 6/30/23.
4c	(Code:) (Expenses \$ 3,022,715 · including grants of \$) (Revenue \$ 610,358 ·
40	(Code:) (Expenses \$ 3,022,715. including grants of \$) (Revenue \$ 610,358. OUTPATIENT TREATMENT PROGRAMS IN MULTIPLE LOCATIONS THROUGHOUT TEXAS;
	SERVING APPROXIMATELY 774 INDIVIDUALS DURING THE YEAR ENDING 6/30/23.
	DERVING MIROMIMITEDI 774 INDIVIDONES DORING INE IEME ENDING 0750725.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 28,761,582.
	Form 990 (2022

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
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	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			Х
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	х	
100	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	- 22	
ıza		12a	х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
J	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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	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 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 assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	Х	
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			17
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

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Form 990 (2			FOUNDATION
Part IV	Checklist of	of Required Scho	edules (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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
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 to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? 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,	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а		28a		х
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?	200		-21
C		200		х
00	"Yes," complete Schedule L, Part IV	28c 29	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	21	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			Х
0.4	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		^
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			х
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		Х	
6 -	Part V, line 1	34	Λ	v
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
•	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	ایا		v
	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			7,7
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		77	
Da	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
_	E		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 48 Enter the number of Forms W-2G included on line 1a Enter -0- if not applicable 0			
	Effect the number of Forms with a mineral and applicable.			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	X	

232004 12-13-22

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

				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 796								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	Х						
3а			3a	Х						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b	Х						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other $\frac{1}{2}$									
	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 A	, ,			37					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a 5b		X					
b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?									
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				Х					
	any contributions that were not tax deductible as charitable contributions?		6a							
D	If "Yes," did the organization include with every solicitation an express statement that such contribut		- Ch							
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).		6b							
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payor?	7a	х						
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X						
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w		76							
·	to file Form 8282?	•	7c		х					
d	If "Yes," indicate the number of Forms 8282 filed during the year	1 1								
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		Х					
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?										
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?										
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7g 7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by the								
sponsoring organization have excess business holdings at any time during the year?										
9 Sponsoring organizations maintaining donor advised funds.										
a Did the sponsoring organization make any taxable distributions under section 4966?										
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b							
10	Section 501(c)(7) organizations. Enter:	1 1								
а	Initiation fees and capital contributions included on Part VIII, line 12	10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter:	l I								
а	Gross income from members or shareholders	11a								
D	Gross income from other sources. (Do not net amounts due or paid to other sources against	446								
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	12a							
		12b	IZa							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120								
	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.		100							
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans	13b								
С	Enter the amount of reserves on hand	13c								
14a			14a		Х					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	eration or			Х					
excess parachute payment(s) during the year?										
	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	nt income?	16		Х					
	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 ac									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17							
	If "Yes," complete Form 6069.									

232005 12-13-22

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year la			
	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 on line 1a, above, who are independent 1b 15			
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		X
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				
	more members of the governing body?	7a		X
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		X
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 the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	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, 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.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
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) availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	d finar	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MATT KUHLMAN - 713-266-9944			
	11931 WICKCHESTER LN. STE 300, HOUSTON, TX 77043			

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.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	(do box,	not cl	Posi heck i ss per	ition more rson i	than	one h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) BILL BAILEY	40.00	х		x				988,250.	0.	67 215
PRESIDENT & CEO (2) MATT KUHLMAN	40.00	Δ		Δ	$\vdash\vdash$			900,250.	0.	67,315.
VICE PRESIDENT & CFO	±0.00			x				208,401.	0.	29,029.
(3) KELLEE WEBB	40.00				\vdash			200,401.		23,023.
VICE PRESIDENT & CHRO				x				171,995.	0.	25,835.
(4) ANGEL HULL (UNTIL 5/26/23)	40.00							,		,
ASSISTANT VICE PRESIDENT				х				168,167.	0.	25,190.
(5) NANCY LOZANO	1.00									
NURSE RN						Х		126,074.	0.	16,678.
(6) HEATHER STEPHENS	1.00									
DIRECTOR OF CLINICAL SERVICES AND ED				Ш		Х		115,824.	0.	19,877.
(7) MONIQUE HARDIN	1.00							100 555		16 000
NURSE RN	40 00			Ш		Х		102,557.	0.	16,082.
(8) BRIAN REEVES (UNTIL 1/25/23)	40.00			x				100 000	0	10 272
SENIOR DIRECTOR OF MARKETING	40.00			Δ	$\vdash \vdash$			100,000.	0.	10,372.
(9) DAN REYNOLDS	40.00			x				104,394.	0.	2,497.
SENIOR REGIONAL DIRECTOR (10) EUGENE HALL (UNTIL 9/20/22)	40.00			A	\vdash			104,394.	0.	2,431.
SENIOR REGIONAL DIRECTOR	40.00			$ _{\mathbf{x}} $				76,215.	0.	13,870.
(11) ERIC JETER (UNTIL 7/28/22)	40.00							70,213.	<u> </u>	13,070.
SENIOR REGIONAL DIRECTOR				x				61,959.	0.	11,037.
(12) RICK GRINNAN	1.00			П				,		,
BOARD OF DIRECTORS		Х						0.	0.	0.
(13) ALEX HOWARD	1.00									
TREASURER, BOARD OF DIRECTORS		Х		Х				0.	0.	0.
(14) ABEL REYNA	1.00									_
BOARD OF DIRECTORS		Х						0.	0.	0.
(15) MIKE VIATOR	1.00									-
BOARD OF DIRECTORS	1 00	Х		Ш	Ш			0.	0.	0.
(16) LARRY HOBBS	1.00	, ,							_	•
BOARD OF DIRECTORS	1 00	Х			\square			0.	0.	0.
(17) KELTY BAKER	1.00	х						0.	0.	0
BOARD OF DIRECTORS		Λ		igsquare	igsquare			<u> </u>	U •	0.

232007 12-13-22

Form 990 (2022) CENIKOR	FOUNDAT:	101	N.						**_**	*18	61	Pa	.ge 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghe	st C	ompensated Employe	es (continued)				
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average	(do	Position (do not check more than one				one	Reportable	Reportable		Estin	nate	d
	hours per	box	, unle	ss pe	erson is both an		h an	compensation	compensation	1	amo	unt c	of
	week	officer and a director/trustee			r/trus	tee)	from	from related		ot	her		
	(list any	director						the	organizations		compe		
	hours for related	or di	e,			ated		organization	(W-2/1099-MIS	C/		n the	
	organizations	ustee	trust		ap.	suadı		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		organ and r		
	below	ual tr	ional		ploye	t con	_	1099-NEC)			organi		
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	orme				organi	Zutio	110
(18) BENTLEY SANFORD	1.00	_	_		~					_			
BOARD OF DIRECTORS		Х						0.		0.			0.
(19) GEOFFREY CRABTREE	1.00												
BOARD OF DIRECTORS		Х						0.		0.			0.
(20) RICK FOUNTAIN	1.00												
BOARD OF DIRECTORS		Х						0.		0.			0.
(21) JOY SCHMITZ	1.00												
BOARD OF DIRECTORS		Х						0.		0.			0.
(22) CHRIS NICOSIA	1.00												_
BOARD OF DIRECTORS		Х						0.		0.			0.
(23) RALPH HAWKINS	1.00			l									•
CHAIRMAN, BOARD OF DIRECTORS	1	Х		Х				0.		0.			0.
(24) JOHN MARMADUKE	1.00												^
BOARD OF DIRECTORS	1 00	Х						0.		0.			0.
(25) PATRICK DUGAN	1.00	,,		,,									^
SECRETARY, BOARD OF DIRECTORS	1 00	Х		Х				0.		0.			0.
(26) SCOTT JONES	1.00	x						0.		0.			Λ
BOARD OF DIRECTORS		Λ		<u> </u>				2,223,836.			237	7.5	0.
1b Subtotal								2,223,830.		0.	431	, / (0.
c Total from continuation sheets to Part V								2,223,836.		-	237	70	_
d Total (add lines 1b and 1c)											431	, / () 4 •
2 Total number of individuals (including but r	ot limited to tr	ose	liste	ed a	bove	e) wr	no re	eceived more than \$100	0,000 of reportable	€			9
compensation from the organization										—	Tv	es	No
2 Did the averagination list any favorage officers							اماء				- 1	<u> </u>	NO
3 Did the organization list any former officer,			•		•		_		•		,		Х
line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	um of roportab							or componentian from	the organization		3		
and related organizations greater than \$15									the organization		4	x	
5 Did any person listed on line 1a receive or a									idual for services			_	
rendered to the organization? If "Yes," com					-						5		Х
Section B. Independent Contractors	,				,						- 1		
1 Complete this table for your five highest co	mpensated in	depe	ende	nt c	ontr	acto	ors th	hat received more than	\$100,000 of com	pensa	tion fro	m	
the organization. Report compensation for	the calendar y	ear (endi	ng v	vith	or w	ithin	the organization's tax	year.				
(A)								(B)			(C)		

(A) Name and business address	NONE	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including b			

\$100,000 of compensation from the organization

Form 990 (2022) CENIKOR
Part VIII Statement of Revenue

		Check if Schedule O c	ontain	s a response	or note to any lir	ne in this Part VIII			
						(A)	(B)	(C)	(D) Revenue excluded
						Total revenue	Related or exempt function revenue	Unrelated business revenue	from tax under
							, and the state of		sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns		1a					
3ra Ioui	b	Membership dues		1b					
ts, (С	Fundraising events		1c	99,214.				
la E	d	Related organizations		1d					
ini,	е	Government grants (contri	bution	s) 1e	17,133,193.				
i Si	f	All other contributions, gifts, g	grants, a	and					
ig H		similar amounts not included	above	1f	4,069,734.				
du	g	Noncash contributions included in	lines 1a-	1f 1g \$	3,163,658.				
<u>8</u> 0	h	Total. Add lines 1a-1f				21,302,141.			
					Business Code				
ce	2 a	MEDICAID & PRIVATE I	NSUR	ANCE	622210	8,828,272.			
er.	b	INSURANCE - VA			622210	5,709,663.	5,709,663.		
Program Service Revenue	С	OTHER PROVIDER			622210	2,864,328.	2,864,328.		
ran ev	d	RE-ENTRY RENT			622210	829,668.	829,668.		
og	е	PRIVATE PAY			622210	425,374.	425,374.		
ه ا	f	All other program service r	evenu	e					
	g	Total. Add lines 2a-2f				18,657,305.			
	3	Investment income (includ	ing div	ridends, inter	est, and				
		other similar amounts)				197,134.			197,134.
	4	Income from investment of	f tax-ex	xempt bond	proceeds				
	5	Royalties							
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a	745,047					
		Less: rental expenses	6b	1,185,481					
		Rental income or (loss)	6c	-440,434	•				
		Net rental income or (loss)	-			-440,434.		-338,996.	-101,438.
	7 a	Gross amount from sales of	<u>⊢`</u>	i) Securities	(ii) Other				
		assets other than inventory	· - 		2,400.				
o l	b	Less: cost or other basis		050 000	4 245				
ŭ		'	7b	250,000	· · · · · · · · · · · · · · · · · · ·				
ther Revenue		· /	7с	2,007	-1,945.	62			62
¥		Net gain or (loss)				62.			62.
Ę	8 a	Gross income from fundraisin	-	, ,					
١		including \$							
		contributions reported on			20,211.				
	b	Part IV, line 18							
					1 40,000.	-27,797.			-27,797.
		Net income or (loss) from f Gross income from gaming		_		21,151.			21,151.
	эа	Part IV, line 19	-		1,049,349.				
	h								
		Net income or (loss) from g			,	37,802.		43,627.	-5,825.
		Gross sales of inventory, le			1	,			-,,,,,,
	10 4	and allowances			a				
	h	Less: cost of goods sold							
		Net income or (loss) from s			•				
<u></u>		(1000) 110111	2.500		Business Code				
Miscellaneous Revenue	11 a	OTHER INCOME			900099	492,718.	492,718.		
ane une	b				900099	-1,036,975.			
	c					. ,	· · · ·		
Aisc		All other revenue							
_		Total. Add lines 11a-11d				-544,257.			
	12	Total revenue. See instruction				39,181,956.	18,113,048.	-295,369.	62,136.

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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).

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	nplete all columns. All oth	ner organizations must co	mplete column (A).								
	Check if Schedule O contains a response or note to any line in this Part IX											
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to domestic organizations											
	and domestic governments. See Part IV, line 21											
2	Grants and other assistance to domestic											
	individuals. See Part IV, line 22											
3	Grants and other assistance to foreign											
	organizations, foreign governments, and foreign											
	individuals. See Part IV, lines 15 and 16											
4	Benefits paid to or for members											
5	Compensation of current officers, directors,	0 000 000	ECO (12	1 000 500	160 601							
	trustees, and key employees	2,223,837.	768,613.	1,292,593.	162,631							
6	Compensation not included above to disqualified											
	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)	16 604 410	14 412 051	2 140 526	100 000							
7	Other salaries and wages	10,004,410.	14,413,051.	2,148,526.	122,833.							
8	Pension plan accruals and contributions (include	675 706	177 615	184,705.	12 2E <i>C</i>							
_	section 401(k) and 403(b) employer contributions)	1 2/7 560	477,645. 1,073,317.	253,563.	13,356. 20,688.							
9	Other employee benefits	1,347,300.	1,214,011.									
10	Payroll taxes	1,455,336.	1,414,U11•	221,862.	19,463.							
11	Fees for services (nonemployees):	32,195.		32,195.								
a	Management	627,804.		627,804.								
b	Legal	206,037.	4,594.	201,443.								
	Accounting	200,037.	=, 5, 5, 5 = 0	201,443.								
d	Lobbying Professional fundraising services. See Part IV, line 17											
f	Investment management fees											
g	Other. (If line 11g amount exceeds 10% of line 25,											
9	column (A), amount, list line 11g expenses on Sch O.)	2,729,040.	2,018,294.	700,979.	9,767.							
12	Advertising and promotion	291,074.	, , -	291,074.	- ,							
13	Office expenses	424,068.	240,153.	182,476.	1,439.							
14	Information technology	575,098.	293,117.	265,121.	16,860.							
15	Royalties	-	-									
16	Occupancy	2,730,857.	2,718,957.		11,900.							
17	Travel	285,523.	117,887.	161,298.	6,338.							
18	Payments of travel or entertainment expenses											
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings											
20	Interest	73,186.	73,186.									
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	1,368,445.	1,293,812.	55,067.	19,566.							
23	Insurance	1,105,431.	966,441.	123,567.	15,423.							
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	RESIDENT EXPENSE	2,010,316.	2,010,316.									
a b	REPAIRS/MAINTENANCE/FUE	534,992.	481,407.	53,036.	549							
C	SUPPLIES	369,703.	337,582.	31,971.	150							
d	MEDICAL EXPENSE	218,531.	218,531.	0=,0,1=								
	All other expenses	53,347.	40,668.	10,822.	1,857							
25	Total functional expenses. Add lines 1 through 24e	36,022,504.	28,761,582.	6,838,102.	422,820.							
26	Joint costs. Complete this line only if the organization	, , , , , , , , , , ,	, , , , , , , , ,	,,	, = = •							
	reported in column (B) joint costs from a combined											
		l										
	educational campaign and fundraising solicitation.											

	rt X	Balance Sheet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			12,475,336.	1	11,888,238.
	2	Savings and temporary cash investments		250,000.	2	0.	
	3	Pledges and grants receivable, net	12,981,428.	3	12,264,011		
	4	Accounts receivable, net			1,713,535.	4	2,827,030
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqual					
		under section 4958(f)(1)), and persons describe	ed in sec	ction 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ř	9				211,298.	9	241,697
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	33,667,957.			
	b	Less: accumulated depreciation	10b	8,703,666.	18,048,839.	10c	24,964,291
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		531,532.	15	648,660	
	16	Total assets. Add lines 1 through 15 (must equ			46,211,968.	16	52,833,927
	17	Accounts payable and accrued expenses			2,326,845.	17	2,514,968
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ies	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, subs					
<u> </u>		controlled entity or family member of any of the			0 260 400	22	11 240 025
_	23	Secured mortgages and notes payable to unrel		· · · · · · · · · · · · · · · · · · ·	8,268,499.	23	11,340,025
	24	Unsecured notes and loans payable to unrelate		· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, pa	•				
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X	0.		190,857
	000	of Schedule D			10,595,344.		14,045,850
	26	Total liabilities. Add lines 17 through 25			10,333,344.	26	14,043,030
es		Organizations that follow FASB ASC 958, ch	eck ner	e 🔼			
ğ	07	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions			22,920,878.	27	27,155,983
3al	27	***************************************			12,695,746.	28	11,632,094
<u>B</u>	28	Net assets with donor restrictions Organizations that do not follow FASB ASC 9			12,055,740.	20	11,002,004
Ξ		and complete lines 29 through 33.	200, CH	eck liefe			
ō	20					20	
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or e			29 30		
Ass	30 31	Retained earnings, endowment, accumulated in				31	
<u>et</u> /	32	Total net assets or fund balances		• • • • • • • • • • • • • • • • • • • •	35,616,624.	32	38,788,077
	ا کو				46,211,968.	33	52,833,927

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,18				
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,02				
3	Revenue less expenses. Subtract line 2 from line 1	3		3,159,452				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))							
5	Net unrealized gains (losses) on investments	5			1,8			
6	Donated services and use of facilities	6		1	0,1	90.		
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	38	3,78	8,0	77.		
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII					X		
					Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?			2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basi	3,					
	consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audi	t,					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule	Ο.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the							
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За	Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required							
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	Х			

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

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

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CENIKOR FOUNDATION

Employer identification number **-**1861

D		Decree Con Dedution	01						
Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.									
The	orgar	nization is not a private found	ation is not a private foundation because it is: (For lines 1 through 12, check only one box.)						
1		A church, convention of ch	urches, or association	on of churches describe	d in sectio	n 170(b)(1)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990).)				
3		A hospital or a cooperative)(b)(1)(A)(i	ii).		
4		•					•	the hospital's name	
•		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:							
5		<u> </u>	or the benefit of a co	llogo or university owner	d or opera	tod by a a	overnmental unit describ	and in	
5		An organization operated for		niege of university owner	u or opera	ted by a g	overninental unit descri	Jeu III	
		section 170(b)(1)(A)(iv). (C							
6		A federal, state, or local go							
7	X	An organization that norma	ally receives a substa	antial part of its support t	rom a gov	ernmental	unit or from the general	l public described in	
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a land-grant	college	
		or university or a non-land-	-			-	_	-	
		university:	9			,	,,	,	
10		An organization that norma	ally receives (1) more	than 33 1/30% of its sun	nort from	contributio	one momborehin fooe a	nd gross receipts from	
10		-	•	•	-			- ·	
		activities related to its exen							
		income and unrelated busin		e (less section 511 tax) fr	om busine	esses acqu	lired by the organization	after June 30, 1975.	
		See section 509(a)(2). (Co							
11	Щ	An organization organized	and operated exclus	sively to test for public sa	ifety. See	section 50	09(a)(4).		
12		An organization organized	and operated exclus	sively for the benefit of, to	perform :	the function	ons of, or to carry out the	e purposes of one or	
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section :	509(a)(2).	See section 509(a)(3).	Check the box on	
		lines 12a through 12d that	describes the type of	of supporting organizatio	n and con	nplete line	s 12e, 12f, and 12g.		
а		Type I. A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported or	ganization(s), typically by	y giving	
		the supported organization	· · · · · · · · · · · · · · · · · · ·		•	-		-	
		organization. You must o		* * * * * * * * * * * * * * * * * * * *	, ,			11 3	
b		Type II. A supporting org	-		tion with it	te eunnort	ed organization(s), by ha	avina	
			· ·					-	
		control or management of			ame perso	ons mai co	ontrol or manage the sup	oported	
		organization(s). You mus							
C	;		-					ed with,	
	_	_ its supported organizatio	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.		
C	ıL	☐ Type III non-functionally	y integrated. A supp	oorting organization oper	ated in co	nnection \	vith its supported organ	ization(s)	
		that is not functionally int	tegrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement and an attent	tiveness	
		requirement (see instruct	tions). You must cor	mplete Part IV, Sections	A and D,	and Part	V.		
e		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	a Type I, Type II, Type III		
		functionally integrated, or							
f	Ente	er the number of supported of		, 3 11					
		vide the following information						·	
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount of monetary	(vi) Amount of other	
		organization	``	(described on lines 1-10	Yes	No	support (see instructions)	support (see instructions)	
		-		above (see instructions))	103	140			
Tota	al								
							i	1	

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	27,090,822.	13,631,500.	18,503,104.	21,444,221.	21,302,141.	101,971,788.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	27,090,822.	13,631,500.	18,503,104.	21,444,221.	21,302,141.	101,971,788.	
	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						585,626.	
6	Public support. Subtract line 5 from line 4.						101,386,162.	
	ction B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
	Amounts from line 4	27,090,822.	13,631,500.	18,503,104.	21,444,221.	21,302,141.	101,971,788.	
	Gross income from interest,	, ,	, ,	, ,	, ,	, ,	, , , , , , , , , , , , , , , , , , ,	
_	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	29,641.	20,194.	4.471.	169,576.	219.150.	443.032.	
9	Net income from unrelated business							
·	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)	233,236.	228,372.	267,666.	401,079.	481,811.	1,612,164.	
11	Total support. Add lines 7 through 10	,	, ,	,	,	, ,	104,026,984.	
	Gross receipts from related activities,	etc (see instruction	ons)			12 85	,861,294.	
	First 5 years. If the Form 990 is for the	•	,				, , .	
	organization, check this box and stor							
Sec	tion C. Computation of Publ							
	Public support percentage for 2022 (column (f))		14	97.46 %	
	Public support percentage from 2021					15	98.21 %	
	33 1/3% support test - 2022. If the o					nore, check this bo	ox and	
	stop here. The organization qualifies as a publicly supported organization X							
b	b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation				
17a	and stop here. The organization qualifies as a publicly supported organization 7a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,							
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization							
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization							
b	b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or							
	more, and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the							
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization							
<u>1</u> 8	Private foundation. If the organization							
			•				(Form 000) 2022	

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support	clow, picase com	piete i dit ii.j					
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
	Gifts, grants, contributions, and	, ,	` `	` ,	<u> </u>	1	`,	
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
2	Gross receipts from activities that							
3	are not an unrelated trade or bus- iness under section 513							
4	Tax revenues levied for the organ-							
7	ization's benefit and either paid to							
_	or expended on its behalf					+		
5	The value of services or facilities furnished by a governmental unit to							
	the organization without charge							
	Total. Add lines 1 through 5	<u> </u>		+	+	+		
	Amounts included on lines 1, 2, and 3 received from disqualified persons							
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
c	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6.)							
Se	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
k	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b							
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
	Total support. (Add lines 9, 10c, 11, and 12.)	<u> </u>				1	<u> </u>	
14	First 5 years. If the Form 990 is for the	ne organization's f	first, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,	
_	check this box and stop here						<u></u>	
	ction C. Computation of Publ							
15	5 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))						%	
	6 Public support percentage from 2021 Schedule A, Part III, line 15							
Se	ction D. Computation of Inves	stment Incom	ne Percentage					
17		ment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17 %						
18	Investment income percentage from 2	ment income percentage from 2021 Schedule A, Part III, line 17						
19a	9a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not							
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	ifies as a publicly s	supported organiz	ation		
k	33 1/3% support tests - 2021. If the line 18 is not more than 33 1/3%, che	•			•	•		
20	Private foundation. If the organization			•		· ·		

232023 12-09-22

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
00		
6		
7		
8		
9a		
9b		
9с		
10-		
10a		
10b		

Par	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one of			
	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		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in 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		
Sec	tion D. All Type III Supporting Organizations			
	<i>y</i> 11 0 0		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			110
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeafsee instruction	ns).		
а	The organization satisfied the Activities Test. Complete line 2 below.	•		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below</i> .			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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.			
а	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.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b | 232025 12-09-22 | Schedule A (Form 990) 2022

Sche	dule A (Form 990) 2022 CENIKOR FOUNDATION			**-***1861 Page 6
Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga	anizations	· ·
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	n Nov. 20, 1970 (explain	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu-	st comple	te Sections A through E.	
Sect	ion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount Subtract line 5 from line 4 unless subject to			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2022

instructions).

emergency temporary reduction (see instructions).

	dule A (Form 990) 2022 CENTKOR FOUND		-		^-^^1861 Page 7
Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _{(continu}	ıed)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported			
	organizations, in excess of income from activity			2	
_3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	3	
4	Amounts paid to acquire exempt-use assets			4	
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
_6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	е		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	าร	Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
	Underdistributions, if any, for years prior to 2022 (reason-				
_	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
	From 2017				
	From 2018				
	From 2019				
	From 2020				
	From 2021				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
_ <u>i</u>	Carryover from 2017 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				

Schedule A (Form 990) 2022

Part VI. See instructions.

and 4c. 8 Breakdown of line 7: a Excess from 2018 **b** Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2023. Add lines 3j

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

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2022

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
MARY E BIVINS FOUNDATION	2,666,166.	585,626.
Fotal Excess Contributions to Schedule A, Part II, Line 5		585,626.

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

CENIKOR FOUNDATION

-*1861

Organization type (check one):					
Filers of	:	Section:			
Form 990	0 or 990-EZ	\overline{X} 501(c)($\overline{3}$) (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			
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.			
General	Rule				
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.			
Special	Rules				
X	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 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; line 1. Complete Parts I and II.			
	contributor, during literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.			
	year, contributions is checked, enter h purpose. Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year\$			
answer "	No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).			

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

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

Name of organization Employer identification number

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

	, , , , , , , , , , , , , , , , , , , ,		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARY E BIVINS FOUNDATION 2311 W 16TH AVE AMARILLO, TX 79102-2303	\$1,139,633.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	US DEPT OF HEALTH AND HUMAN SERVICES 200 INDEPENDENCE AVENUE, S.W. WASHINGTON, DC 20201	\$ 12,670,337.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	STATE OF TEXAS DEPARTMENT OF STATE HEALTH SERVICES PO BOX 149347 AUSTIN, TX 78714-9347	\$ 4,174,066.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	TURTLE CREEK MANOR 11931 WICKCHESTER LN STE 300 HOUSTON, TX 77043	\$ 2,492,968.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

-*1861

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

CENIKOR FOUNDATION

-*1861

Part II	Noncach Property (see instructions). Her duplicate copies of Part II if a	additional engage is peeded	
	Noncash Property (see instructions). Use duplicate copies of Part II if a	auditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	BUILDING LEASE		
1			
		\$1,139,633.	06/30/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	CONTRIBUTION OF A/R, BUILDINGS, FOOD,		
4	VEHICLES, PROFESSIONAL FEES, AND SUPPLIES		
		\$ 2,259,754.	09/01/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a)		, ,	
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
· uiti			
	5-22	\$	Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Name of organization **Employer identification number** **-***1861 CENIKOR FOUNDATION Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

CENIKOR FOUNDATION

Employer identification number **-***1861

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other S	Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.		
		(a) Donor advised	d 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	writing that the assets he	eld in donor advised fur	nds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that gra	ant funds can be used	only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for ar	y other purpose confe	rring
_	impermissible private benefit?			
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes	s" on Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organizat		ı	
	Preservation of land for public use (for example, recreated	ation or education)	Preservation of a histo	orically important land area
	Protection of natural habitat		Preservation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contrib	ution in the form of a co	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic str			2c
d	Number of conservation easements included in (c) acquired	· · · · · · · · · · · · · · · · · · ·		
_	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or t	erminated by the organ	nization during the tax
_	year			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the pe			
	violations, and enforcement of the conservation easements			
6	Staff and volunteer hours devoted to monitoring, inspecting	, nandling of violations, ar	nd enforcing conservati	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and an	forcing concentation of	accoments during the year
′	Amount of expenses incurred in monitoring, inspecting, name	ulling of violations, and en	forcing conservation ea	asements during the year
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requiremen	ts of section 170(h)(4)(f	3)(i)
Ŭ	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservat			
_	balance sheet, and include, if applicable, the text of the foot		•	
	organization's accounting for conservation easements.	3		
Par	t III Organizations Maintaining Collections o	of Art, Historical Tre	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its rev	enue statement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education	, or research in furthera	ince of public
	service, provide in Part XIII the text of the footnote to its fina	ncial statements that des	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 98	58, to report in its revenue	e statement and baland	ce sheet works of
	art, historical treasures, or other similar assets held for public	c exhibition, education, or	research in furtherand	e of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$ <u> </u>
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical tre			· · · · · · · · · · · · · · · · · · ·
	the following amounts required to be reported under FASB A	ASC 958 relating to these	items:	
а	Revenue included on Form 990, Part VIII, line 1			\$
<u>b</u>	Assets included in Form 990, Part X			\$
	For Paperwork Reduction Act Notice, see the Instruction			Schedule D (Form 990) 2022

		FOUNDATIO		touisal Tu		Oth	Ci-			T86.		age 2
Pai	rt III Organizations Maintaining C									(contin	ued)	
3	Using the organization's acquisition, accession	on, and other record	ds, chec	k any of the	following tha	at make s	signific	ant use of	its			
	collection items (check all that apply):											
а	Public exhibition	c			hange progra							
b		e	• 🗀	Other								
С	Preservation for future generations											
4	Provide a description of the organization's co								Part X	all.		
5	During the year, did the organization solicit or				•							1
D	to be sold to raise funds rather than to be ma									Yes		No
Pai	rt IV Escrow and Custodial Arrang reported an amount on Form 990, Par		ete if the	e organizatio	n answered	"Yes" on	Form	990, Part	IV, lin	e 9, or		
1a	Is the organization an agent, trustee, custodi		diary for	contribution	ns or other as	sets not	includ	led				
	on Form 990, Part X?								,	Yes		No
b	If "Yes," explain the arrangement in Part XIII											
-									Α	mount	:	
С	Beginning balance						1	С				
	Additions during the year							d				
е	Distributions during the year							е				
f	Ending balance							lf				
2a	Did the organization include an amount on Fo								,	Yes		No
	If "Yes," explain the arrangement in Part XIII.]
Pai	rt V Endowment Funds. Complete if	the organization ar	swered	"Yes" on Fo	orm 990, Par	t IV, line	10.					
		(a) Current year	(b) P	rior year	(c) Two yea	rs back	(d) Thi	ree years ba	ack (e) Four	years	back
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
	and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end baland	ce (line 1	g, column (a	a)) held as:							
а	Board designated or quasi-endowment		_%									
b	Permanent endowment	%										
С	Term endowment	%										
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.										
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	nd administe	ered for t	he			-		
	organization by:										Yes	No
	(i) Unrelated organizations									3a(i)		
	(ii) Related organizations									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza									3b		
4	Describe in Part XIII the intended uses of the		owment	funds.								
Pai	rt VI Land, Buildings, and Equipm			, ,, ,, ,				_				
	Complete if the organization answered											
	Description of property	(a) Cost or o		. ,	or other		ccumu		(c	d) Bool	c value	Э
		basis (investr	nent)		(other)	de	preciat	ion	0	01	<u> </u>	77
	Land				6,427.	6	21.4	622		,81		
	Buildings			40,95	8,552.	0,,	4	,633.	14	,74	J, 9	<u>ту.</u>
	Leasehold improvements			2 72	7,517.	<u> </u>	190	,033.	1	, 248	2 /	Ω /Ι
	Equipment				5,461.	۷, ۵	±07	, 000.			$\frac{5,4}{5,4}$	
	Other		V 251						21	,964		
ιota	II. Add lines 1a through 1e. (Column (d) must e	quai roiiii 990, Part	A, COIUI	rırı (Þ), IINE 1	UC.)				4	, , , , , ,	ェ, ム	ノエ・

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 CENIKOR FOU	INDATION	* *	-***1861 Page 3
Part VII Investments - Other Securities.			J
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	-		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	1
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	45)		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ie 15.)		
Part X Other Liabilities.	L F 000 P-+ IV I'	44 446 O Favor 000 Bart V Kan 0	-
Complete if the organization answered "Yes"	on Form 990, Part IV, line	The or Tit. See Form 990, Part X, line 29	-
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			100 057
(2) LEASE LIABILITY			190,857.
(3)			
(4)			
(5)			
(6)			
(7)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2022

(8)

190,857.

Part XI	Recond	ciliation of Revenue per Audited Financial Statements With Revenue per Return.

	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	40,427,443.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	1,810.		
b	Donated services and use of facilities	2b	10,190.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d	2e	12,000.		
3	Subtract line 2e from line 1			3	40,415,443.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-1,233,487.		
С	Add lines 4a and 4b			4c	-1,233,487.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	39,181,956.		
Pai	rt XII Reconciliation of Expenses per Audited Financial Stateme	Retu	ırn.		

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 37,255,990. Total expenses and losses per audited financial statements 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 2c c Other losses d Other (Describe in Part XIII.) 1,233,486. e Add lines 2a through 2d 36,022,504. 3 Subtract line 2e from line 1 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 **b** Other (Describe in Part XIII.) c Add lines 4a and 4b 4c 36,022,504. 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Part XIII Supplemental Information.

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

PART X, LINE 2:

CENIKOR IS A NOT-FOR-PROFIT ORGANIZATIONS THAT IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE. HOWEVER, CENIKOR IS SUBJECT TO TAXES ON UNRELATED BUSINESS INCOME. FOR THE YEAR ENDED JUNE 30, 2023 AND 2022, CENIKOR HAS MADE PAYMENTS TOTALING APPROXIMATELY \$9,000 AND \$9,500 ON ITS ESTIMATED AMOUNT OF UNRELATED BUSINESS INCOME TAXES.

CENIKOR BELIEVES THAT ALL SIGNIFICANT TAX POSITIONS UTILIZED WILL MORE LIKELY THAN NOT BE SUSTAINED UPON EXAMINATION. PENALTIES AND INTEREST, IF ANY, WOULD BE ACCRUED AS INCURRED AND WOULD BE CLASSIFIED AS GENERAL AND ADMINISTRATIVE EXPENSE IN THE STATEMENTS OF ACTIVITIES.

Schedule D (Form 990) 2022

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization CENIKOR	FOUNDATION					Employer ide * * - * * 1	ntification number 861
Part I Fundraising Activities required to complete this par	Complete if the organization answe	ered "Y	es" o	n Form 990, Part IV, I	ine 1	7. Form 990-E2	I filers are not
 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid individed the compensated at least \$5,000 by the 	sed funds through any of the following solicitates of Solicitates of Solicitates of Special solicitates or oral agreement with any individual solicitates (fundraisers) pursuriduals or entities (fundraisers) pursuriduals or entities (fundraisers)	tion of tion of fundra (inclue	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, trus fundraising services?	stees	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)		(vi) Amount paid to (or retained by) organization
		Yes	No				
Total							
3 List all states in which the organization or licensing.				s or has been notified	d it is	exempt from re	egistration
		_					
		_					

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

Schedule G (Form 990) 2022

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990	EZ, lines 1 and 6b. List	events with gross receip	ts greater than \$5,000.
			(a) Event #1 LUNCHEON EVENTS	(b) Event #2 GOLF TOURNAMENT	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
a)			(event type)	(event type)	(total number)	coi. (c))
Revenue	1	Gross receipts	104,615.	14,810.		119,425.
	2	Less: Contributions	91,224.	7,990.		99,214.
	3	Gross income (line 1 minus line 2)	13,391.	6,820.		20,211.
	4	Cash prizes				
es	5	Noncash prizes				
xpens	6	Rent/facility costs	5,652.	3,630.		9,282.
Direct Expenses	7	Food and beverages	16,046.	1,360.		17,406.
		Entertainment	7,500. 10,598.	3,222.		7,500. 13,820.
	9	Other direct expenses				48,008.
		Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li				-27,797.
Pa				n 990. Part IV. line 19. or		2171314
		\$15,000 on Form 990-EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue	481,811.	567,538.		1,049,349.
ses	2	Cash prizes	380,000.	404,203.		784,203.
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs	31,173.	36,687.		67,860.
	5	Other direct expenses	76,463.		11	159,484.
	6	Volunteer labor	Yes% X No	Yes % X No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			1,011,547.
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			37,802.
o	En	ter the state(s) in which the organization condu	ucts gaming activities. Т	x		
а	ls t	the organization licensed to conduct gaming action." No," explain:	ctivities in each of these	states?		X Yes No
		ere any of the organization's gaming licenses re Yes," explain:	•	_	year?	Yes X No

232082 10-27-22 Schedule G (Form 990) 2022

Sch	edule G (Form 990) 2022 CENTKOR FOUNDATION	^ ^ ^ <u>_</u>	801	Page 3
11	Does the organization conduct gaming activities with nonmembers?	X	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	X No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	An outside facility	—	100	.00 %
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100		70
1-7	Enter the hame and address of the person who prepares the organization's garning special events books and records.			
	Name MATT KUHLMAN			
	Address 11931 WICKCHESTER LN STE 300 - HOUSTON, TX 77043			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	X No
	olf "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		V	X No
	retain the state gaming license?		Yes	LX∐ No
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Da	organization's own exempt activities during the tax year \$ Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Po	ort III li	n a a O	0h 10h
Га		art III, III	nes 9,	90, 100,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G (Form 990)	CENIKOR FOUNDATION	**-***1861 Page 4
Part IV Supplement	CENIKOR FOUNDATION cal Information (continued)	
	(••••••	

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Part I Questions Regarding Compensation

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

CENIKOR FOUNDATION

Employer identification number **-***1861

	·		Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a	Х	
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

232111 10-18-22

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

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	J-2 and/or 1099-MIS compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) BILL BAILEY	(i)	988,250.	0.	0.	57,062.	10,253.		0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MATT KUHLMAN	(i)	208,401.	0.	0.	20,840.	8,189.		0.
VICE PRESIDENT & CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KELLEE WEBB	(i)	171,995.	0.	0.	16,920.	8,915.	197,830.	0.
VICE PRESIDENT & CHRO	(ii)	0.	0.	0.	0.	0.		0.
(4) ANGEL HULL (UNTIL 5/26/23)	(i)	168,167.	0.	0.	16,817.	8,373.		0.
ASSISTANT VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 6:
CENIKOR FOUNDATION HAS A SUPPLEMENTAL COMPENSATION PLAN IN PLACE FOR ITS
OFFICERS, MANAGERS, AND STAFF. SPECIFIC FUNDAMENTAL GOALS FOR CENIKOR,
INCLUDING FINANCIAL PERFORMANCE, MUST BE MET ANNUALLY BEFORE ANY PAYMENTS
ARE MADE UNDER THE PLAN. EACH OFFICER AND MANAGER HAS SPECIFIC QUANTIFIABLE
GOALS WHICH DETERMINE HOW MUCH, IF ANY, SUPPLEMENTAL COMPENSATION IS PAID
OUT.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Name of the organization CENIKOR FOUNDATION **Employer identification number** **-***1861

Pai	rt I Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of det noncash contribut	•	ts
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods	X			SEE SUPP. II		
6	Cars and other vehicles	X	2	49,623.	TRANSACTION	VALUE	
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded						
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential	X	3	2,084,165.	TRANSACTION	VALUE	
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory	X	14	264,733.		NFO	
20	Drugs and medical supplies	X	12	117,085.	SEE SUPP. II	NFO	
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other (RENTAL/LEASE)	X	2	616,997.	TRANSACTION	VALUE	}
26	Other ()						
27	Other ()						
28	Other ()						
29	Number of Forms 8283 received by the organiz	zation durin	g the tax year for c	ontributions			
	for which the organization completed Form 828	33, Part V, [Oonee Acknowledg	ement 29			
					-	Yes	No
30a	During the year, did the organization receive by	/ contribution	on any property rep	ported in Part I, lines 1 throu	gh 28, that it		
	must hold for at least 3 years from the date of t						
	exempt purposes for the entire holding period?	·				30a	X
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any nonstandard contribu	ıtions?	31 X	
32a	Does the organization hire or use third parties of	or related or	ganizations to soli	cit, process, or sell noncash			
	contributions?					32a	X
b	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,		
	describe in Part II.						

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

Schedule M (Form 990) 2022

Schedule M (Form 990) 2022

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

Employer identification number

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

CENIKOR FOUNDATION

-*1861

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OUTPATIENT, & RECOVERY HOUSING, SUBSTANCE ABUSE AND BEHAVIORAL HEALTH

SERVICES IN TX AND NM.

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

THE BOARD OF DIRECTORS ARE GIVEN THE OPPORTUNITY TO REVIEW THE FORM PRIOR

TO FILING.

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

EACH YEAR, THE BOARD OF DIRECTORS IS REQUIRED TO COMPLETE CONFLICT OF

INTEREST FORMS, INDICATED IN THE POLICY, WHICH REQUIRES THEM TO DISCLOSE

ANY POTENTIAL CONFLICT OF INTEREST.

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

THE OFFICERS COMPENSATION IS REVIEWED ANNUALLY BY THE INDEPENDENT

COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS AND APPROVED BY THE ENTIRE

BOARD OF DIRECTORS.

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

FORM 990 IS POSTED ON THE CENIKOR FOUNDATION WEBSITE, AT

WWW.CHARITYNAVIGATOR.ORG, AT WWW.GUIDESTAR.ORG, AND IS AVAILABLE TO THE

PUBLIC UPON REQUEST. SUMMARY FINANCIAL RESULTS ARE REPORTED IN THE ANNUAL

REPORT. ADDITIONAL DOCUMENTS AND POLICIES WHICH MUST BE PUBLICLY AVAILABLE

ARE PROVIDED UPON REQUEST.

FORM 990, PART XI, LINE 2C

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

Schedule O (Form 990) 2022

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

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

2022
Open to Public Inspection

Employer identification number

OMB No. 1545-0047

-1861 CENIKOR FOUNDATION Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (a) (b) (c) (d) (e) (f) Name, address, and EIN (if applicable) Primary activity Legal domicile (state or Total income End-of-year assets Direct controlling of disregarded entity entity foreign country) Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt Part II organizations during the tax year. (a) (b) (c) (d) (e) (f) (g) Section 512(b)(13) Legal domicile (state or **Exempt Code** Public charity Direct controlling Name, address, and EIN Primary activity controlled of related organization section status (if section entity entity? foreign country) 501(c)(3)) Yes No TRUSTED EMPLOYMENT SOLUTIONS - 74-1460655 11931 WICKCHESTER LN. STE 300 Х HOUSTON, TX 77043 WORK TRAINING TEXAS 501(C)(3) LINE 7 CENIKOR

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

organization a career as a particular grant tax years																				
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)		(i)	(j)	(k)									
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	domicile Direct controlli	Direct controlling	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of total	Share of total	Share of total	Share of total	Share of total			Share of	Disprop	Disproportionate Code V-		Genera	or Percentage
or related organization		(state or foreign	entity	excluded from tax under	(related, unrelated, income en	end-of-year assets	allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partne	Ownership									
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0									
							I	L												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sect 512(b contri enti	tion b)(13) rolled :ity?
		country)		or tracty		400010		Yes	No
-									
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									<u> </u>

-*1861

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No		
1	During the tax year, did the organization engage in any of the following transactions	s with one or more r	elated organizations listed	in Parts II-IV?					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	<i>'</i>			1a		X		
	Gift, grant, or capital contribution to related organization(s)				1b		X		
С	Gift, grant, or capital contribution from related organization(s)				1c	X	Х		
d Loans or loan guarantees to or for related organization(s)									
е	Loans or loan guarantees by related organization(s)				1e		X		
f	Dividends from related organization(s)				1f		X		
g	g Sale of assets to related organization(s)								
h	Purchase of assets from related organization(s)				1h		X		
i	Exchange of assets with related organization(s)				1i		X		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X		
k	k Lease of facilities, equipment, or other assets from related organization(s)								
Performance of services or membership or fundraising solicitations for related organization(s)									
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
o Sharing of paid employees with related organization(s)									
p Reimbursement paid to related organization(s) for expenses									
q Reimbursement paid by related organization(s) for expenses									
•	, , , , , , , , , , , , , , , , , , , ,								
r	Other transfer of cash or property to related organization(s)				1r		Х		
	Other transfer of cash or property from related organization(s)				1s		X		
	If the answer to any of the above is "Yes," see the instructions for information on w				1				
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved				
(1) [CURTLE CREEK RECOVERY CENTER	С	2,492,968.	FAIR MKT VALUE					
(2)									
(3)							_		
(4)									
(5)									
(6)									
	0.00.14.00	43		Schedule I	2 (Eorr	n 990)	2022		

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e) Are all	(f)	(g)	(t	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec	Share of	Share of	Dispr	opor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	Percentage
of entity		(state or foreign	related, unrelated, lexcluded from tax under	501(c)(3) orgs.?	total	end-of-year	alloca	tions?	l of Schedule K-1	partner	ownership
		country)	sections 512-514)	Yes No	income	assets	Yes	No	(Form 1065)	Yes N	5
							_				
										\vdash	-
							_			\vdash	+
		1			1				1		

UNITED WAY OF HAYS & CALDWELL COUNTIES ANTI-TERRORISM COMPLIANCE MEASURES

In compliance with the USA Patriot Act and other counter- Counties requires that each agency certify the following:	terrorism laws, the United Way of Hays & Caldwell
"I hereby certify on behalf of Foundations will be used in corand asset control laws, statues and executive orders."	mpliance with all applicable anti-terrorist financing
Print Name: Matt Kuhlman	Title: VP/CFO
Signature:	Date: 7/11/22

NON-DISCRIMINATION POLICY STATEMENT

Please add your organization's non-discrimination policy statement below using the appropriate font size that will keep this document to 1 page.

Cenikor is proud to be an Equal Opportunity Employer. We respect the dignity and diversity of individual work force members. We also recognize the value of diversity in our organization and strive to employ a diverse workforce similar to the communities and people we serve. Cenikor provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, gender, sexual orientation, gender identity, national origin, age, disability, genetic information, marital status, amnesty or status as a covered veteran in accordance with applicable federal, state and local laws. Cenikor complies with applicable state and local laws governing nondiscrimination in employment in every location in which the company has facilities.

Cenikor assures that all applicants for employment and all Cenikor employees are given equal consideration based solely on job-related factors, such as qualifications, experience, performance and availability. Such equal consideration applies to all personnel actions, including but not limited to recruitment, selection, appointment, job assignment, training, transfer, promotion, merit increases, demotion, termination, layoff, recall, leaves of absence, compensation and benefits. Cenikor reviews, evaluates and monitors all personnel matters to ensure they are in accordance with this policy.

CENIKOR FOUNDATION

Audits of Financial Statements

June 30, 2023 and 2022



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LaPorte, APAC 111 Veterans Blvd. | Suite 600 Metairie, LA 70005 504.835.5522 | Fax 504.835.5535 LaPorte.com

Independent Auditor's Report

Board of Directors Cenikor Foundation Houston, Texas

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of Cenikor Foundation (the nonprofit Organization), which comprise the statements of financial position as of June 30, 2023 and 2022, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements present fairly, in all material respects, the financial position of Cenikor Foundation as of June 30, 2023 and 2022, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Cenikor Foundation and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, and *Government Auditing Standards*, will always detect a material misstatement when it exists.

The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing GAAS and *Government Auditing Standards*, we:

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

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

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal and state awards, as required by Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards and the Texas Grant Management Standards, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal and state awards is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued a report dated November 16, 2023 on our consideration of Cenikor Foundation's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, and other matters. The purpose of that report is solely to describe the scope of our testing of internal controls over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Cenikor Foundation's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Cenikor Foundation's internal control over financial reporting and compliance.

A Professional Accounting Corporation

Metairie, LA November 16, 2023

CENIKOR FOUNDATION Statements of Financial Position June 30, 2023 and 2022

		2023	2022
Assets			
Current Assets			
Cash and Cash Equivalents	\$	11,888,238	\$ 12,475,338
Accounts Receivable, Net		2,827,030	1,713,535
Government Grants Receivable		821,088	630,346
Pledges Receivable		10,000	-
Certificate of Deposit		-	250,000
Unconditional Promise to Give - Facility Lease,			
Current Maturities		966,770	918,161
Assets Held for Sale		299,941	361,968
Prepaid Expenses		241,697	211,298
Total Current Assets		17,054,764	16,560,646
Unconditional Promise to Give - Facility Lease,			
Net of Current Portion		10,466,153	11,432,921
Property and Equipment, Net		24,964,291	18,048,837
Right-of-Use Assets, Net		190,838	-
Other Assets, Net		157,881	169,564
Total Assets	\$	52,833,927	\$ 46,211,968
Liabilities and Net Assets			
Current Liabilities			
Accounts Payable and Accrued Liabilities		2,514,968	\$ 2,326,845
Lease Liability		129,509	-
Notes Payable, Current Portion		409,185	309,089
Total Current Liabilities		3,053,662	2,635,934
Lease Liability, Net of Current		61,348	-
Notes Payable, Net of Current Maturities		10,930,840	7,959,410
Total Liabilities		14,045,850	10,595,344
Net Assets			
Without Donor Restrictions			
Undesignated		27,155,983	21,231,179
Board-Designated - Program Expansion		-	1,689,699
With Donor Restrictions		11,632,094	12,695,746
Total Net Position		38,788,077	35,616,624
Total Liabilities and Net Assets	<u>\$</u>	52,833,927	\$ 46,211,968

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

CENIKOR FOUNDATION Statement of Activities For the Year Ended June 30, 2023

	Without Donor	With Donor		
	Restrictions	Restrictions	Total	
Public Support and Revenues				
Direct Government Aid	\$ 162,358	\$ -	\$ 162,358	
Special Events Revenue	119,425	-	119,425	
Grant and Contract Revenue	16,970,835	-	16,970,835	
Contributions of Nonfinancial Assets	3,173,848	-	3,173,848	
Contributions of Cash and Other Financial Assets	838,576	67,500	906,076	
Total Public Support and Revenues	21,265,042	67,500	21,332,542	
Revenues, Gains, and Other Support				
Net Client Service Revenue	16,872,022	_	16,872,022	
Rental Income	1,493,355	-	1,493,355	
Investment Income	197,134	-	197,134	
Unrealized Gain on Investments	1,810	-	1,810	
Other Income, Net	530,580	-	530,580	
Net Assets Released From Restrictions	1,131,152	(1,131,152)		
Total Revenues, Gains, and Other Support	41,491,095	(1,063,652)	40,427,443	
Expenses				
Program Services	28,841,019	-	28,841,019	
General and Administrative	7,944,142	-	7,944,142	
Fundraising	470,828	-	470,828	
Total Expenses	37,255,990	<u>-</u>	37,255,990	
Change in Net Assets	4,235,105	(1,063,652)	3,171,453	
Net Assets, Beginning of Year	22,920,878	12,695,746	35,616,624	
Net Assets, End of Year	\$ 27,155,983	\$ 11,632,094	\$ 38,788,077	

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

CENIKOR FOUNDATION Statement of Activities For the Year Ended June 30, 2022

	Without Donor Restrictions	With Donor Restrictions	Total
Public Support and Revenues			
Direct Government Aid	\$ 90,603	\$ -	\$ 90,603
Special Events Revenue	81,641	-	81,641
Grant and Contract Revenue	12,387,927	-	12,387,927
Contributions of Nonfinancial Assets	2,033,222	6,084,572	8,117,794
Contributions of Cash and Other Financial Assets	566,003	212,500	778,503
Total Public Support and Revenues	15,159,396	6,297,072	21,456,468
Revenues, Gains, and Other Support			
Net Client Service Revenue	11,676,762	-	11,676,762
Rental Income	1,438,848	-	1,438,848
Investment Income	11,170	-	11,170
Other Income, Net	481,402	-	481,402
Net Assets Released From Restrictions	877,934	(877,934)	-
Total Revenues, Gains, and Other Support	29,645,512	5,419,138	35,064,650
Expenses			
Program Services	22,615,760	-	22,615,760
General and Administrative	7,884,547	-	7,884,547
Fundraising	397,133	-	397,133
Total Expenses	30,897,440	-	30,897,440
Change in Net Assets	(1,251,928)	5,419,138	4,167,210
Net Assets, Beginning of Year	24,172,806	7,276,608	31,449,414
Net Assets, End of Year	\$ 22,920,878	\$ 12,695,746	\$ 35,616,624

CENIKOR FOUNDATION Statement of Functional Expenses For the Year Ended June 30, 2023

			Supporting	g Activ	ities	
	Program	General and				
	Services	Adı	ministrative	Fun	draising	Total
Direct Resident Expenses						
Food	\$ 1,709,950	\$	-	\$	-	\$ 1,709,950
Clinical	19,503		-		-	19,503
Clothing and Sundry	80,054		-		-	80,054
Education/Job Readiness	125		-		-	125
Lab Analysis	67,853		-		-	67,853
Facility Licensure	3,556		-		-	3,556
Resident Travel	38,710		-		-	38,710
Other	 90,565		-		-	90,565
Total Direct Resident Expenses	 2,010,316		-		-	2,010,316
Other Expenses						
Accounting	4,594		108,535		-	113,128
Advertising	-		291,074		-	291,074
Computer Support	293,117		265,121		16,860	575,098
Employee Benefits	1,073,317		253,563		20,688	1,347,568
Household Supplies	120,622		14,182		-	134,804
Human Resources	162,435		213,266		-	375,701
Lawn Care Supplies	76,512		17,789		-	94,301
Insurance	966,441		155,640		15,423	1,137,504
Interest	73,186		302,559		-	375,745
Kitchen Supplies	140,448		-		-	140,448
Medical	218,531		-		-	218,531
Office Expense	160,662		17,516		-	178,179
Parking and Fuel	57,267		8,950		549	66,766
Payroll Taxes	1,214,011		221,862		19,463	1,455,337
Pension Expense	477,645		184,705		13,356	675,706
Postage Expense	3,477		3,741		· -	7,218
Professional Fees	1,746,339		1,111,332		-	2,857,672
Professional Training	109,519		159,885		9,767	279,172
Property Taxes	9,109		149,030		· -	158,139
Public Relations	56,054		196,958		1,439	254,451
Rental and Lease	1,669,064		3,351		203	1,672,617
Repairs and Maintenance	391,807		128,495			520,302
Special Event Supplies	-		-		150	150
Salaries	15,181,664		3,490,506		285,464	18,957,633
Relocation Allowance	622		8,416		_	9,038
Shipping	2,109		22,963		_	25,071
Telephone	110,990		41,494		3,620	156,104
Employee Meals and Recognition	17,852		21,411		-	39,262
Travel, Board and Staff	106,245		150,193		6,338	262,776
Travel, Outreach and Business Development	11,642		11,105		-	22,747
Utilities	968,787		164,864		8,077	1,141,728
Vehicle Maintenance	32,334		3,824			36,157
Direct Cost of Event Services	JZ,JJ4 -		-		- 49,865	49,865
Other Expenses	40,046		- 16,074		- -5,000	56,120
Depreciation and Amortization	 1,334,257		205,737		- 19,566	1,559,561
Total Other Expenses	 26,830,703		7,944,142		470,828	35,245,674
Total Functional Expenses	\$ 28,841,019	\$	7,944,142	\$	470,828	\$ 37,255,990

CENIKOR FOUNDATION Statement of Functional Expenses For the Year Ended June 30, 2022

	Supporting Activities						
		Program	G	eneral and			
		Services	Adı	ministrative	Fun	draising	Total
Direct Resident Expenses							
Food	\$	1,506,500	\$	-	\$	-	\$ 1,506,500
Clinical		12,568		-		-	12,568
Clothing and Sundry		83,688		-		-	83,688
Education/Job Readiness		692		-		-	692
Lab Analysis		48,458		-		-	48,458
Facility Licensure		20,125		-		-	20,125
Resident Travel		33,256		-		-	33,256
Other		67,833		-		-	67,833
Total Direct Resident Expenses		1,773,121		-		-	1,773,121
Other Expenses							
Accounting		1,572		87,639		_	89,211
Advertising		-,0		213,451		_	213,451
Computer Support		246,614		241,628		13,496	501,737
Employee Benefits		1,014,928		246,220		21,132	1,282,280
Household Supplies		125,210		9,573		21,102	134,783
Human Resources		81,514		129,212		-	210,726
Lawn Care Supplies		77,609		23,212		-	100,820
Insurance		688,918		134,583		- 11,777	835,277
Interest				284,081		11,777	-
		100,151		· ·		-	384,231
Kitchen Supplies		138,167		-		-	138,167
Medical		297,232		-		-	297,232
Office Expense		108,637		18,121		-	126,758
Parking and Fuel		50,018		9,913		687	60,617
Payroll Taxes		967,678		272,061		19,797	1,259,537
Pension Expense		401,174		206,079		11,698	618,951
Postage Expense		2,538		3,605		-	6,143
Professional Fees		834,870		1,492,192		-	2,327,062
Professional Training		80,364		114,491		6,925	201,781
Property Taxes		93		137,831		-	137,925
Public Relations		39,457		191,918		74	231,449
Rental and Lease		1,488,071		6,477		355	1,494,902
Repairs and Maintenance		354,627		87,547		-	442,174
Salaries		11,646,533		3,383,198		249,501	15,279,232
Relocation Allowance		-		9,319		-	9,319
Shipping		797		12,846		-	13,644
Telephone		90,423		36,585		2,313	129,321
Employee Meals and Recognition		11,162		20,152		-	31,313
Travel, Board and Staff		66,640		105,188		5,144	176,971
Travel, Outreach and Business Development		19,204		6,579		-	25,783
Utilities		752,474		178,119		7,177	937,771
Vehicle Maintenance		25,138		1,643		_	26,782
Direct Cost of Event Services		· <u>-</u>		´-		29,088	29,088
Other Expenses		131,042		6,544		-	137,586
Depreciation and Amortization		999,785		214,539		17,969	1,232,294
Total Other Expenses		20,842,640		7,884,547		397,133	29,124,318
Total Functional Expenses	\$	22,615,760	\$	7,884,547	\$	397,133	\$ 30,897,440

CENIKOR FOUNDATION Statements of Cash Flows For the Years Ended June 30, 2023 and 2022

	2023	2022
Cash Flows from Operating Activities		
Change in Net Assets	\$ 3,171,453	\$ 4,167,210
Adjustments to Reconcile Change in Net Assets to		
Net Cash Provided by (Used in) Operating Activities		
Depreciation and Amortization	1,374,583	1,232,294
Bad Debt Expense	1,036,975	1,424,982
Loss on Disposal of Property and Equipment	1,945	24,964
Contribution of Leased Facility	-	(6,084,572)
Donated Property and Equipment	(2,113,611)	(858,692)
Cash Contributions Restricted by Donor	(67,500)	(212,500)
Changes in Assets and Liabilities		
Accounts Receivable, Net	(2,150,470)	(851,497)
Unconditional Promises to Give	918,159	806,466
Government Grants Receivable	(190,742)	(175,486)
Pledges Receivable	(10,000)	31,498
Prepaid Expenses	(30,399)	305,937
Right-of-Use Assets - Operating Leases	190,838	-
Other Assets, Net	-	1,644
Accounts Payable and Accrued Liabilities	188,123	(940,435)
Operating Lease Liability	(190,857)	-
Net Cash Provided by (Used in) Operating Activities	2,128,497	(1,128,187)
Cash Flows from Investing Activities		
Liquidation of Certificate of Deposit	250,000	-
Cash Paid for Lease Acquisition Costs	(19,224)	-
Purchases of Property and Equipment	(6,084,766)	(1,086,024)
Proceeds From Sale of Property and Equipment	2,400	109,355
Net Cash Flows Used in Investing Activities	(5,851,590)	(976,669)
Cash Flows from Financing Activities		
Cash Contributions Restricted by Donor	67,500	212,500
Proceeds from Additional Borrowings	3,400,000	-
Issuance Costs on Additional Borrowings	(22,354)	-
Payments on Notes Payable	(309,153)	(284,178)
Net Cash Flows Provided by (Used in) Financing Activities	3,135,993	(71,678)
Net Change in Cash and Cash Equivalents	(587,100)	(2,176,534)
Cash and Cash Equivalents, Beginning of Year	12,475,338	14,651,872
Cash and Cash Equivalents, End of Year	\$ 11,888,238	\$ 12,475,338
Supplemental Disclosures:		
Cash Paid for Interest	\$ 375,745	\$ 384,231
Cash Paid for Taxes		\$ 9,579
Non-Cash Contribution of Property and Equipment	\$ 8,952 \$ 2,113,611	\$ 858,692
Non-Cash Right-of-Use Assets and Liabilities	\$ 375,874	\$ -
Non-Cash Contribution of Leased Facility		
NOTE-CAST CONTINUATION OF LEASED FACILITY	\$ -	\$ 6,084,572

CENIKOR FOUNDATION

Notes to Financial Statements

Note 1. Organization

Cenikor Foundation (Cenikor or Organization) is a not-for-profit, tax-exempt corporation incorporated on July 30, 1968, for the purpose of providing behavioral health and substance use disorder treatment services through a continuum of care to individuals, organizations, and the community stakeholders at large. Areas of service are comprised of substance use disorder and co-occurring mental health treatment, rehabilitation, education, vocational training, and behavioral health. Services are conducted in Cenikor facilities throughout Amarillo, Austin, Corpus Christi, Dallas, Houston, Killeen, San Marcos, Tyler, and Waco, Texas, and Farmington, New Mexico.

The Cenikor continuum of care program consists of detoxification, intensive and supportive residential, outpatient, peer recovery support services, and recovery housing for adults. In addition, Cenikor has intensive residential, outpatient, prevention, and youth recovery programs for adolescents.

Note 2. Summary of Significant Accounting Policies

Basis of Presentation

The Organization's financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP). The Organization is required to report information regarding its financial position and activities according to two classes of net assets. Accordingly, net assets of the Organization and changes therein are classified and reported as follows:

Net Assets Without Donor Restrictions - represent expendable funds available for operations that are not otherwise limited by donor restrictions. Included in unrestricted net assets are funds designated by the Board of Directors (the Board) for future expansion of services related to the mission of the Organization. These funds are held in short-term investments and can be released for expenditure by the Board for any reason.

Net Assets With Donor Restrictions - consist of contributed funds subject to donor or grantor-imposed restrictions related to a specific purpose or requiring a specific passage of time before the funds can be spent and can also include funds subject to irrevocable donor restrictions requiring the assets be maintained in perpetuity for the purpose of generating investment income to fund current operations.

Use of Estimates

In preparing the financial statements in conformity with U.S. GAAP, management is required to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Fair Value Considerations

The Organization uses fair value to measure financial and certain nonmonetary financial assets and liabilities. The Organization uses a three-tiered hierarchy for fair value measurements that draws distinction between market participant assumptions based on (i) observable inputs such as quoted prices in active markets (Level 1); (ii) inputs other than quoted prices in active markets that are observable either directly or indirectly (Level 2); and (iii) unobservable inputs reflecting the Organization's own assumptions about the inputs used to determine fair value (Level 3). Level 1 provides the most reliable measure of fair value, where Level 3 generally requires significant judgment. The fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

Contributions

Contributions are recognized when the donor makes a promise to give to the Organization that is, in substance, unconditional. Contributions that are restricted by the donor for future periods or a specific purpose are reported as increases in net assets with donor restrictions depending on the nature of the restriction. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions. Donor restricted contributions in which the restrictions are met in the same year as received are recorded as unrestricted contributions in the accompanying statements of activities.

Unconditional promises to give that are expected to be collected within one year are recorded at their realizable value. Unconditional promises to give that are expected to be collected after one year or more are recorded at the present value of estimated future cash flows. The discounts on those amounts are computed using a risk-free interest rate applicable to the year in which the promise is received. Amortization of the discount is included as contribution revenue. Conditional promises to give are not included as support until the conditions are substantially met. Conditional promises to give are contributions that are those with a measurable performance or other barrier and a right of return are not recognized until the conditions on which they depend have been met. The Organization has conditional contributions of approximately \$10,776,000 and \$7,933,700 as of June 30, 2023 and 2022, respectively, that relate to unspent government grants.

Contributions (Continued)

At June 30, 2021, the Organization had a conditional contribution of all assets and liabilities of Four Winds Recovery Center, Inc. (Four Winds), a New Mexico not-for-profit organization, that was contingent on the transfer of certain contracts to the Organization. The conditions were met during the year ended June 30, 2022 and the Organization recognized contributions that are more fully described in Note 4. The Organization entered into a management agreement with Four Winds on June 1, 2021 to provide executive administrative, operational, and managerial services for a fee of \$4,000 per month.

At June 30, 2022, the Organization had a conditional contribution of all assets and liabilities of Turtle Creek Manor, Inc, a Texas not-for-profit organization, that was contingent on the transfer of certain contracts to the Organization, which occurred subsequent to June 30, 2022. The conditions were met during the year ended June 30, 2023 and the Organization recognized contributions that are more fully described in Note 4. The Organization entered into a management agreement with Turtle Creek Manor, Inc. on March 24, 2022, to provide executive administrative, operational, and managerial services for a fee of \$4,000 per month.

The Organization reports gifts of property and equipment as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained; the Organization reports expirations of donor restrictions when the donated or acquired long-lived assets are placed in service. See Note 14 for further information

Donations are recorded as in-kind contributions at the estimated fair value of the gift. The fair value of food is based on pre-established standards. The contribution value and related program expense for donations of clothing, furniture, and other goods are computed using standards set by management and approximate the fair value for second-hand clothing and other items.

Financial Instruments, Credit Risk, and Concentration of Credit Risk

Financial instruments that subject the Organization to concentrations of credit risk consist principally of cash and cash equivalents and receivables. The Organization places its cash with financial institutions it believes to be creditworthy. Deposits may exceed federal deposit insurance provided on such deposits; however, these deposits typically may be redeemed upon demand and therefore, bear minimal risk. In monitoring this credit risk, the Organization periodically evaluates the stability of the financial institution.

Cash and Cash Equivalents

For purposes of the statements of cash flows, the Organization considers all unrestricted, highly-liquid investments with a maturity of three months or less to be cash equivalents.

Accounts Receivable

Accounts receivable includes insurance receivables that are charged for Medicaid-eligible and privately insured clients and client accounts receivable for the amount the client is responsible for. The receivables bear no interest and are normally due upon receipt.

Generally, no collateral or other security is required to support receivables. Delinquent receivables are written off, based on individual credit evaluation and specific circumstances of the account and when all reasonable collection efforts have been made.

The balance of accounts receivable, net, at July 1, 2021 was approximately \$2,287,000.

Government Grants Receivable

Grants receivable consist of government grants and are considered to be fully collectible; accordingly, no allowance for doubtful accounts has been recorded. If amounts become uncollectible, they will be charged to operations when the determination is made. Credit risk for government grants receivable is considered limited due to the credit worthiness of the federal and state funding agencies and historical collection rates.

Pledges Receivable

Pledges receivable due from donors are considered to be fully collectible and due within one year at June 30, 2023 and 2022; accordingly, no allowance for doubtful accounts has been recorded.

Certificates of Deposit

Certificates of deposit have original maturities ranging between three months to one year and are reported at cost as an estimate of fair value measured at Level 1.

Property and Equipment

Purchased property and equipment are recorded at cost. Donated property and equipment are recorded at fair value at the date of donation. Routine maintenance, repair, renewal, and replacement costs are charged against operations in the year incurred. Upon retirement or disposal of assets, the cost and related accumulated depreciation are removed from the accounts and the gain or loss, if any, is included in the results of operations. Expenditures, which materially increase values or extend useful lives of property and equipment, are capitalized. Buildings and equipment are depreciated using the straight-line method based on the estimated useful lives of the assets, generally as follows:

	Estimated Useful
Asset	Life in Years
Equipment and Furniture	3 - 5 Years
Buildings and Improvements	10 - 20 Years
Vehicles	3 - 5 Years

Assets Held For Sale

Assets held for sale at June 30, 2023 and 2022, primarily include land and a building that house the Fort Worth programs that are on the market for sale. The Organization has determined the location to not be financially economical and will cease operations once the building is sold.

Leases

In February 2016, the Financial Accounting Standards Board (FASB) issued Accounting Standards Codification (ASC) Topic 842, Leases, to increase transparency and comparability among organizations related to their leasing arrangements. The update requires lessees to recognize most leases on their balance sheets as a right-of-use (ROU) asset representing the ROU an underlying asset and a lease liability representing the obligation to make lease payments over the lease term, measured on a discounted basis. Topic 842 also requires additional disclosure of key quantitative and qualitative information for leasing arrangements. Similar to the previous lease guidance, the update retains a distinction between finance leases (similar to capital leases in Topic 840, Leases) and operating leases, with classification affecting the pattern of expense recognition in the income statement. The Organization adopted Topic 842 on January 1, 2022, using the optional transition method to the modified retrospective approach, which eliminates the requirement to restate the prior-period financial statements. Under this transition provision. the Organization has applied Topic 842 to reporting periods beginning on January 1, 2022. while prior periods continue to be reported and disclosed in accordance with the Organization's historical accounting treatment under ASC Topic 840, Leases.

CENIKOR FOUNDATION

Notes to Financial Statements

Note 2. Summary of Significant Accounting Policies (Continued)

Leases (Continued)

The Organization elected the "package of practical expedients" under the transition guidance within Topic 842, in which the Organization does not reassess (1) the historical lease classification, (2) whether any existing contracts at transition are or contain leases, or (3) the initial direct costs for any existing leases. The Organization has not elected to adopt the "hindsight" practical expedient, and therefore will measure the ROU asset and lease liability using the remaining portion of the lease term upon adoption of ASC 842 on July 1, 2022.

The Organization determines if an arrangement is or contains a lease at inception, which is the date on which the terms of the contract are agreed to, and the agreement creates enforceable rights and obligations. A contract is or contains a lease when (i) explicitly or implicitly identified assets have been deployed in the contract, and (ii) the Organization obtains substantially all of the economic benefits from the use of that underlying asset and directs how and for what purpose the asset is used during the term of the contract. The Organization also considers whether its service arrangements include the right to control the use of an asset.

The Organization made an accounting policy election available under Topic 842 not to recognize ROU assets and lease liabilities for leases with a term of 12 months or less. For all other leases, ROU assets and lease liabilities are measured based on the present value of future lease payments over the lease term at the commencement date of the lease or July 1, 2022, for existing leases upon the adoption of Topic 842. To determine the present value of lease payments, the Organization made an accounting policy election available to non-public companies to utilize a risk-free borrowing rate, which is aligned with the lease term at the lease commencement date or remaining term for leases existing upon the adoption of Topic 842.

Future lease payments may include fixed rent escalation clauses or payments that depend on an index (such as the consumer price index), which is initially measured using the index or rate at lease commencement. Subsequent changes of an index and other periodic market-rate adjustments to base rent are recorded in variable lease expense in the period incurred. Residual value guarantees or payments for terminating the lease are included in the lease payments only when it is probable they will be incurred.

Leases (Continued)

The Organization has made an accounting policy election to account for lease and non-lease components in its contracts as a single lease component for its real estate, vehicle and equipment asset classes. The non-lease components typically represent additional services transferred to the Organization, such as common area maintenance for real estate, which are variable in nature and recorded in variable lease expense in the period incurred.

Adoption of Topic 842 resulted in the recording of additional ROU assets and lease liabilities related to the Organization's operating leases of \$277,754 at July 1, 2022. The adoption of the new lease standard did not materially impact net income or cash flows and did not result in a cumulative-effect adjustment to the opening balance of net assets.

Future undiscounted cash flows for each of the next five years and thereafter and a reconciliation to the lease liabilities recognized on the statement of financial position are as follows as of June 30, 2023:

Year Ending June 30,	Amount
2024 2025	\$ 131,470 61,598
Total Lease Payments	193,068
Less: Imputed Interest	2,211
Total Present Value of Lease Liability	\$ 190,857

The weighted-average remaining lease term on the operating leases is 1.2 years. The weighted-average discount rate on the operating leases is 1.6 years.

Functional Expenses

The majority of expenses can be directly identified with the program or supporting services to which they relate and are charged accordingly. Functional expenses that cannot readily be related to a specific program are charged to the various programs based upon hours worked, square footage, number of program staff, or other reasonable methods for allocating the Organization's multiple functional expenditures.

Income Taxes

Cenikor is a not-for-profit organizations that is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. However, Cenikor is subject to taxes on unrelated business income. For the years ended June 30, 2023 and 2022, Cenikor has made payments totaling approximately \$9,000 and \$9,500 on its estimated amount of unrelated business income taxes.

Cenikor believes that all significant tax positions utilized will more likely than not be sustained upon examination. Penalties and interest, if any, would be accrued as incurred and would be classified as general and administrative expense in the statements of activities.

Recent Accounting Pronouncements - Not Yet Adopted

In June 2016, the FASB issued ASU 2016-13, Financial Instruments-Credit Losses (Topic 326): Measurement of Credit Losses on Financial Instruments (ASU 2016-13), which it clarified and updated through the following ASUs (collectively, ASC Topic 326):

- ASU 2018-19, Codification Improvements to Topic 326, Financial Instruments-Credit Losses
- ASU 2019-04, Codification Improvements to Topic 326, Financial Instruments-Credit Losses, Topic 815, Derivatives and Hedging, and Topic 825, Financial Instruments
- ASU 2019-05, Financial Instruments-Credit Losses (Topic 326): Targeted Transition Relief
- ASU 2019-10, Financial Instruments-Credit Losses (Topic 326), Derivatives and Hedging (Topic 815), and Leases (Topic 842): Effective Dates
- ASU 2019-11, Codification Improvements to Topic 326, Financial Instruments-Credit Losses
- ASU 2022-02, Financial Instruments-Credit Losses (Topic 326): Troubled Debt Restructurings and Vintage Disclosures

Note 2. Organization and Summary of Significant Accounting Policies (Continued)

Recent Accounting Pronouncements - Not Yet Adopted (Continued)

ASC Topic 326 changes the impairment model for most financial assets measured at amortized cost, as well as certain other instruments, from an incurred loss model to an expected loss model. As a result, organizations will be required to recognize credit losses on financing receivables and other financial assets earlier than previously stipulated and for the entire contractual term of an instrument. The update applies to financial assets recorded at amortized cost basis (e.g., loan receivables, trade and certain other receivables, off-balance sheet credit exposures such as loan commitments and financial guarantees) but does not apply to financial assets measured at fair value (e.g., promises to give/pledges receivable; loans and receivables between entities under common control). ASC Topic 326 is effective for the Organization's fiscal year 2024. Management continues to evaluate the potential impact of this update.

Note 3. Revenue Recognition

Net Client Service Revenue

Client service revenues relate to contracts with clients in which the Organization's performance obligations are to provide behavioral health and treatment services to clients. Revenues are recorded during the period the obligations to provide services are satisfied. Performance obligations are generally satisfied over a period of time that varies from an hour to months, based on the type of service received. The contractual relationships with clients, in most cases, also involve a third-party payer, such as Medicaid, commercial insurance and veterans administration, and the transaction prices for the services provided are dependent upon the terms provided by or negotiated with the third-party payers.

Client service revenue is reported at the estimated net realizable amounts from clients and third-party payers. The Organization has agreements with third-party payers that provide for payments at amounts different from its established rates, primarily for Medicaid statutorily-set rates and negotiated rates with private insurance companies. Revenue under third-party agreements is subject to audit and retroactive adjustment. Laws and regulations governing the Medicaid programs are complex and subject to interpretation. Estimated reimbursement amounts are adjusted in subsequent periods once final settlements are determined.

The collection of outstanding receivables from third-party payers and clients is a significant source of cash and is critical to the Organization's operating performance. The primary collection risks relate to denied insurance claims and uninsured client accounts, including client accounts for which the primary insurance carrier has paid the amounts covered by the applicable agreement, but client responsibility amounts, including deductibles and copayments, remain outstanding. Implicit price concessions relate primarily to amounts due directly from clients and insurance carriers. Estimated implicit price concessions are recorded for all uninsured accounts, regardless of the age of those accounts. Accounts are written off when all reasonable internal and external collection efforts have been performed.

Note 3. Revenue Recognition (Continued)

Net Client Service Revenue (Continued)

The estimates for implicit price concessions are based upon management's assessment of historical write-offs and expected net collections, business and economic conditions, trends in federal, state and private employer health care coverage and other collection indicators. Management relies on the results of detailed reviews of historical write-offs and collections that represent a majority of revenues and accounts receivable (the "hindsight analysis") as a primary source of information in estimating the collectability of accounts receivable.

Note 4. Acquisitions and Contributions of Financial and Nonfinancial Assets

On May 1, 2022, an act of donation by Four Winds Recovery Center, Inc, a not-for-profit entity that provides substance abuse treatment and recovery support services in Farmington, New Mexico, was executed that contributed its operating assets to Cenikor. The contracts that Four Winds had were assigned to Cenikor. A lease agreement that Four Winds had to facilitate its operations was assigned and assumed by Cenikor. The lease agreement is effective through January 5, 2053. The assets contributed and the liabilities assumed were recorded at fair value at the date of donation, which resulted in a contribution without donor restriction in the amount of \$1,070,681 and a restricted donation of the property lease in the amount of \$6,084,572.

A summary reconciliation of the Four Winds contribution is as follows:

Cash and Cash Equivalents	\$ 221,224
Accounts Receivable	92,701
Property and Equipment	858,692
Other Assets	 10,349
Total Assets	 1,182,966
Accounts Payable	6,251
Accrued Liabilities	 106,034
Total Liabilities	 112,285
Total	 1,070,681

On September 1, 2022, Cenikor acquired Turtle Creek Manor, Inc. a not-for-profit taxexempt organization that provides substance use disorder treatment in Dallas, Texas. Cenikor began operating the existing Turtle Creek Manor, Inc. programs and services. In connection with the closing of this acquisition, which expands the service capabilities for both organizations, Turtle Creek Manor, Inc. donated all of its assets and liabilities to Cenikor, and all of its contracts were assigned to Cenikor.

CENIKOR FOUNDATION

Notes to Financial Statements

Note 4. Acquisitions and Contributions of Financial and Nonfinancial Assets (Continued)

A summary of the Turtle Creek Manor, Inc. contribution is as follows:

Cash and Cash Equivalents	\$ 233,214
Accounts Receivable	173,438
Property and Equipment	2,113,611
Other Assets	17,396
Total Assets	2,537,659
Accounts Payable	19,103
Accrued Liabilities	25,588
Total Liabilities	44,691
Total	\$ 2,492,968

Note 5. Accounts Receivable

Accounts receivable as of June 30th were as follows:

2023		2022
1,278,067	\$	1,323,877
1,420,129		190,808
108,660		183,864
20,174		14,986
2,827,030	\$	1,713,535
	20,174	20,174

CENIKOR FOUNDATION

Notes to Financial Statements

Note 6. Property and Equipment

Property and equipment as of June 30th was as follows:

	2023	2022
Land	\$ 8,816,427	\$ 6,053,852
Buildings and Improvements	20,958,551	15,837,619
Equipment and Furniture	3,159,823	2,896,545
Vehicles	577,694	487,079
Construction in Progress	155,461	307,617
	 33,667,956	25,582,712
Less: Accumulated Depreciation	 (8,703,665)	(7,533,875)
Total Property and Equipment, Net	\$ 24,964,291	\$ 18,048,837

Depreciation expense amounted to \$1,340,605 and \$1,232,294 for the years ended June 30, 2023 and 2022, respectively.

Note 7. Line of Credit and Notes Payable

The Organization has a revolving line of credit with a bank that provides for maximum borrowings of \$2,000,000 with interest at the prime rate as quoted by the Wall Street Journal plus 0.75%; however, at no time will the interest rate be less than 3.500% per annum. This line of credit is set to mature on February 5, 2024. There were no borrowings during 2023 or 2022, and no balance outstanding as of June 30, 2023 or 2022.

Note 7. Line of Credit and Notes Payable (Continued)

Notes payable at June 30th, were as follows:

	2023	2022
Term note payable to a financial institution, monthly installments of \$18,671.39 including interest at 2.896%, balloon payment of approximately \$1,959,000 due in July 2025; secured by land and building.	\$ 2,277,097	\$ 2,431,876
Term note payable to a financial institution, monthly installments of \$38,078 including interest at 5.166%, balloon payment of approximately \$5,353,000 due in September 2025; secured by land and building.	5,691,857	5,846,232
Term note payable to a financial institution, monthly installments of \$25,522 including interest at 6.490%, balloon payment of approximately \$2,921,000 due in June 2028; secured by land and building.	 3,400,000	-
Total Notes Payable	11,368,954	8,278,108
Less: Unamortized Debt Financing Costs Less: Current Portion of Notes Payable	 (28,929) (409,185)	(9,609) (309,089)
Total Notes Payable, Less Current Maturities	\$ 10,930,840	\$ 7,959,410

Future annual principal payments as of June 30, 2023 are as follows:

Year Ending June 30,	Amount
2024	\$ 409,185
2025	429,490
2026	7,412,956
2027	107,099
2028	3,010,224
Total	\$ 11,368,954

The notes payable agreements contain certain financial reporting and negative covenants. At June 30, 2023, the Organization was in compliance with its financial reporting covenants.

Note 8. Net Assets with Donor Restrictions

Net assets with donor restrictions are primarily restricted by donors for use of donated facilities and land in future periods. As of June 30th, net assets with donor restrictions are available for the following locations:

		2023	2022
Amarillo	\$	5,445,485	\$ 6,380,031
Farmington		5,987,438	6,071,051
Fort Worth		90,826	87,030
Houston		17,500	85,650
Waco		57,410	38,549
Corporate		28,435	28,435
Corpus Christi		5,000	-
Odyssey House		-	5,000
Total	<u>\$</u>	11,632,094	\$ 12,695,746

Included in the amounts restricted for the Odyssey House and Waco are amounts subject to irrevocable donor restrictions that require the assets be maintained in perpetuity for the purpose of generating investment income to fund current operations. As of June 30, 2023 and 2022, these irrevocable restrictions for Odyssey House totaled \$-0- and \$5,000, respectively. As of June 30, 2023 and 2022, these irrevocable restrictions for Waco totaled \$24,215 and \$24,215, respectively. Included in the amounts restricted for the Amarillo and Farmington locations is the use of donated facilities in future periods (See Note 11).

During the years ended June 30 2023 and 2022, net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes or by occurrence of events specified by the donors as follows:

	2023	2022
Amarillo	\$ 934,547	\$ 792,585
Farmington	83,613	13,521
Fort Worth	11,204	-
Houston	85,650	40,194
Waco	11,138	17,584
Corporate	-	5,000
Corpus Christi	-	9,050
Odyssey House	 5,000	-
Total	\$ 1,131,152	\$ 877,934

Note 9. Commitments

The Organization purchased an office building during 2019 to house the corporate headquarters and a portion of the space is leased to unaffiliated entities under non-cancellable operating lease agreements expiring in various months through May 2025. During 2023 and 2022, the Organization recognized rental income from these leases totaling approximately \$745,000 and \$689,000, respectively, which is included in rental income in the accompanying statements of activities.

At June 30, 2023, future minimum rental income under operating leases is as follows:

Year Ending	
June 30,	Amount
2024	\$ 405,358
2025	384,851
2026	342,453
2027	332,012
2028	221,648
Thereafter	327,648_
Total	\$ 2,013,970

Note 10. Contingencies

Litigation

In the normal course of business, the Organization is subject to various claims, legal actions, and disputes. The Organization provides for losses, if any, in the year in which they can be reasonably estimated. In management's opinion, there are currently no such matters outstanding that would have a material effect on the accompanying financial statements.

Grant Assistance

The Organization receives significant financial assistance from federal, state, and local government agencies in the form of grants. The disbursement of funds received under these programs generally requires compliance with terms and conditions specified in the grant agreement and are subject to audit by the grantor and other regulatory agencies. The Organization underwent multiple audits during the year and are ongoing. Any disallowed claims or penalties resulting from such audits become a liability of the Organization at the time those liabilities become probable. At June 30, 2023 and 2022, the estimated liability for potential disallowed claims or penalties assessed to the Organization amounted to \$-0-.

Note 11. Donated Facilities

In December 2018, Cenikor entered into a lease agreement with an unrelated third party in Amarillo, Texas for the use of a facility starting January 1, 2019. The lease is for the establishment of residential substance abuse treatment services. The initial term is for ten years for \$100 per year. The lease may be renewed for an additional ten years for \$150 per year and for an additional five years for \$200 per year.

Due to the terms of the lease for the building not reflecting a market rate, Cenikor has recognized an in-kind contribution based on the present value of the difference between the estimated fair value of the lease and the contract amount. The in-kind contribution recognized at the effective date of the lease was \$8,884,604. The in-kind contribution was estimated based on a monthly fair value lease amount of \$94,969 over 10 years, discounted at 5.17%. For the year ended June 30, 2023, \$834,546 was included as a component of net assets released from restrictions while the interest component of \$305,087 was recognized as a contribution of a nonfinancial asset. For the year ended June 30, 2022, \$792,585 was included as a component of net assets released from restrictions while the interest component of \$347,048 was recognized as a contribution of a nonfinancial asset.

The realization of the future promise to give of this facility is as follows:

Year Ending June 30,	Amount
2024	\$ 878,730
2025	925,252
2026	974,238
2027	1,025,817
2028	1,080,126
Thereafter	561,322_
Total	\$ 5,445,485

As mentioned in Note 4, Cenikor received an assignment of the lease agreement on property that facilitates substance abuse treatment and recovery support services in Farmington, New Mexico. The annual rent commitment on this property is \$25 for a term that expires on January 5, 2053. Due to the terms of the lease not reflecting a market rate, Cenikor has recognized a contribution of a nonfinancial asset based on the present value of the difference between the estimated fair value of the lease and the contract amount. The contribution recognized was \$6,084,572 and is included as a component of the facility leases in Note 14. The contribution was estimated based on a monthly fair value lease amount of \$32,960 over the term of the lease, using a discount rate of 5.17%. For the year ended June 30, 2023, \$83,613 was included as a component of net assets released from restrictions while the interest component of \$311,911 was recognized as a contribution of a nonfinancial asset. For the year ended June 30, 2022, \$13,521 was classified as a net asset released from restriction with \$52,400 included as a nonfinancial contribution.

CENIKOR FOUNDATION

Notes to Financial Statements

Note 11. Donated Facilities (Continued)

The realization of the future promises to give of this facility is as follows:

Year Ending	
June 30,	Amount
2024	\$ 88,040
2025	92,701
2026	97,609
2027	102,777
2028	108,218
Thereafter	5,498,093_
Total	\$ 5,987,438

Note 12. Retirement Plans

Cenikor has a defined contribution pension plan covering substantially all employees. Cenikor will match up to 5% of the participating eligible employee's annual compensation and contribute 5% of the eligible employee's annual compensation as a "safe harbor." Upon entry into the plan, the employee is 100% vested in both the safe harbor and the employee's contributions. The matching contribution is 20% vested per year, starting in year two, with 100% after year six. For the years ended June 30, 2023 and 2022, Cenikor's contributions to the plan totaled approximately amounted to \$676,000 and \$619,000, respectively.

Note 13. Liquidity and Availability of Resources

Financial assets available within one year of the statement of financial position date for general expenditures are as follows:

	2023	2022
Cash and Cash Equivalents	\$ 11,888,238	\$ 12,475,338
Accounts Receivable, Net	2,827,030	1,713,535
Government Grants Receivable	821,088	630,346
Pledges Receivable	10,000	-
Certificate of Deposit	 -	250,000
	15,546,356	15,069,219
Board-Designated Assets	-	(1,689,699)
Assets With Donor Restrictions	 (198,064)	(244,664)
Total	\$ 15,348,292	\$ 13,134,856

Cenikor's financial assets available within one year of the statement of financial position date to meet cash needs for general expenditures consist substantially of cash and cash equivalents, accounts receivable, government grant receivables, pledge receivables, and short-term investments. The receivables are expected to be collected within one year. Financial assets restricted by donors are expected to be used in the normal course of operations in the next twelve months, except the \$29,215 required to be maintained in perpetuity. Cenikor maintains sufficient resources to meet those responsibilities to its donors. There is a fund established by the governing board that may be drawn upon in the event of financial distress or an immediate liquidity need resulting from events outside of the typical life cycle of converting financial assets to cash or settling financial liabilities.

Cenikor has a goal to maintain cash and short-term investments on hand to meet at least 60 days of normal operating expenses, which are, on average, \$92,433 per day. Cenikor has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due. In addition, as part of its liquidity management, Cenikor invests cash in excess of daily requirements in various short-term investments, including certificates of deposit and money market funds.

As described in Note 7, Cenikor has a line of credit through February 2024, in the amount of \$2,000,000, which could be drawn upon in the event of an unanticipated liquidity need.

Note 14. Contributed Nonfinancial Assets

As mentioned in Notes 2, 4, and 11, the Organization receives contributions of nonfinancial assets. For the years ended June 30, contributed nonfinancial assets recognized within the statements of activities included:

		2023	2022
Property Leases	\$	616,998	\$ 6,484,037
Building		901,002	792,585
Land		1,058,898	-
Furniture and Equipment		124,265	-
Food		264,733	496,887
Vehicles		49,623	40,194
Professional Fees		2,786	160,248
Supplies	-	155,543	143,843
Total	\$	3,173,848	\$ 8,117,794

The Organization recognized contributed nonfinancial assets within revenue, as detailed in the table above. Unless otherwise noted, contributed nonfinancial assets did not have donor-imposed restrictions.

The contributed nonfinancial assets, supplies, and services are used in the operations of the rehabilitative facilities in the specific geographic area from where the contribution originated.

In valuing the contributed land and buildings, the Organization estimated the fair value on the basis of recent comparable sales in the respective metropolitan area's commercial real estate market. Furniture and fixtures is valued at market cost for similar items.

In valuing the contributed lease, the Organization estimated the fair value on the basis of recent comparable building lease rates by square foot in the respective metropolitan area's commercial real estate market. As mentioned in Notes 8 and 11, the lease is restricted as to its use by the donor.

In valuing the contributed vehicles, the Organization estimated the fair value on the basis of published market values of those specific vehicles, using year, make, model, and condition of the vehicle.

In valuing the food, professional fees, and supplies, the Organization estimated fair value based on statements from vendors, as well as conducting industry comparisons and searches via the Internet.

CENIKOR FOUNDATION

Notes to Financial Statements

Note 15. Subsequent Events

Management has evaluated subsequent events through the date that the financial statements were available to be issued, November 16, 2023 and determined that no other events occurred that require disclosure. No subsequent events occurring after this date have been evaluated for inclusion in these financial statements.



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INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING SANDARDS

To the Board of Directors Cenikor Foundation Houston, Texas

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Governmental Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Cenikor Foundation (a nonprofit Organization), which comprise the statement of financial position as of June 30, 2023, and the related statement of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated November 16, 2023.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Cenikor Foundation's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Cenikor Foundation's internal control. Accordingly, we do not express an opinion on the effectiveness of Cenikor Foundation's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or combination of deficiencies, in internal control such that there is reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected, on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether Cenikor Foundation's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Governmental Auditing Standards* in considering the Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

A Professional Accounting Corporation

Metairie, LA November 16, 2023



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INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL AND STATE PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE, AND THE STATE OF TEXAS UNIFORM GRANT MANAGEMENT STANDARDS

To the Board of Directors Cenikor Foundation Houston, Texas

Report on Compliance for Each Major Federal and State Program

Opinion on Each Major Federal and State Program

We have audited Cenikor Foundation's (Cenikor or the Organization) compliance with the types of compliance requirements identified as subject to audit in the *OMB Compliance Supplement* and the Texas Grant Management Standards that could have a direct and material effect on each of Cenikor Foundation's major federal and state programs as identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion Cenikor Foundation complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal and state programs for the year ended June 30, 2023.

Basis for Opinion on Each Major Federal and State Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance), and the Texas Grant Management Standards. Our responsibilities under those standards, the Uniform Guidance, and the Texas Grant Management Standards are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of Cenikor Foundation and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relative to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal and state program. Our audit does not provide a legal determination of Cenikor Foundation's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirement referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statues, regulations, rules, and provisions of contracts or grant agreements applicable to Cenikor Foundation's federal and state programs.

Auditor's Responsibility for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on Cenikor Foundation's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted is accordance with generally accepted auditing standards, Government Auditing Standards, the Uniform Guidance, and Texas Grant Management Standards will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, international omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about Cenikor Foundation's compliance with the requirements of each major federal and state program as a whole.

In preforming an audit in accordance with generally accepted auditing standards, *Government Auditing Standards*, the Uniform Guidance, and the Texas Grant Management Standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding Cenikor Foundation's compliance requirements referred to above and performing such other procedures as we considered necessary in circumstances.
- Obtain an understanding of Cenikor Foundation's internal control over compliance relevant
 to the audit in order to design audit procedures that are appropriate in the circumstances
 and to test and report on internal control over compliance in accordance with the Uniform
 Guidance and the Texas Grant Management Standards, but not for the purpose of
 expressing an opinion on the effectiveness of Cenikor Foundation's internal control over
 compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weakness in internal control over compliance that we identified during the audit.

Report on Internal Control Over Compliance

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal and state program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal and state program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal and state program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance and the Texas Grant Management Standards. Accordingly, this report is not suitable for any other purpose.

A Professional Accounting Corporation

Metairie, LA November 16, 2023

CENIKOR FOUNDATION Schedule of Expenditures of Federal and State Awards For the Year Ended June 30, 2023

Federal and State Grantor/Pass-Through Grantor/Program or Cluster Title	Assistance Listing Number	Contract or Pass- through Grantor's I.D. Number	Current Year Expenditures	Current Year Revenues
Federal Awards:				
U.S. Department of Health and Human Services Substance Abuse & Human Services Substance Abuse & Mental Health Services Administration Community Awareness, Intervention, and Mobilization (Community AlM) Eileen Bermudez - Grants Management Officer	93.243	1H79SP082361-01	\$ 188,349	\$ 188,349
U.S. Department of Health and Human Services				
Passed through Texas Health and Human Services Commission				
Block Grants for Prevention and Treatment of Substance Abuse				
Co-Occurring Mental Health & Substance Abuse Services	93.959	HHS000663700010	10,594	10,594
Co-Occurring Mental Health & Substance Abuse Services	93.959	HHS000663700101	11,491	11,491
Co-Occurring Mental Health & Substance Abuse Services	93.959	HHS000663700164	26,801	26,801
Co-Occurring Mental Health & Substance Abuse Services	93.959	HHS000663700201	29,858	29,858
Co-Occurring Mental Health & Substance Abuse Services	93.959	HHS000663700285	5,258	5,258
Treatment Adult Services	93.959	HHS000663700225	495,145	495,145
Treatment Adult Services	93.959	HHS000663700235	909,526	909,526
Treatment Adult Services	93.959	HHS000663700242	1,996,569	1,996,569
Treatment Adult Services	93.959 93.959	HHS000663700246	1,611,721	1,611,721
Treatment Adult Services		HHS000663700248	2,558,390	2,558,390
Treatment Adult Services Treatment Adult Services - Female	93.959	HHS000663700284	225,249 184.025	225,249
Treatment Adult Services - Female Treatment Adult Services - Female	93.959 93.959	HHS000663700249	- ,	184,025
Treatment Adult Services - Female Treatment Adult Services - Female	93.959	HHS000663700250 HHS000663700251	163,584	163,584
Treatment Adult Services - Female Treatment Adult Services - Female	93.959	HHS000663700251	311,219 431,869	311,219 431,869
Treatment Adult Services - Female Treatment Adult Services - Female	93.959	HHS000663700253	331,932	331,932
Treatment Youth Services	93.959	HHS000663700254	539,558	539,558
Youth Recovery Community Services	93.959	HHS000663700257	194,453	194,453
Youth Recovery Community Services	93.959	HHS000663700256	172,909	172,909
Youth Recovery Community Services	93.959	HHS000663700258	183,330	183,330
Youth Prevention Program - Indicated	93.959	HHS000539700193	136,717	136,717
Youth Prevention Program - Indicated	93.959	HHS000539700202	161,294	161,294
Youth Prevention Program - Selective	93.959	HHS000539700193	134,652	134,652
Youth Prevention Program - Selective	93.959	HHS000539700202	114,585	114,585
Youth Prevention Program - Universal	93.959	HHS000539700193	151,899	151,899
Youth Prevention Program - Universal	93.959	HHS000539700202	141,335	141,335
Recovery Support Services	93.959	HHS000448100001	126,064	126,064
Passed through City of Lubbock				
Co-Occuring Mental Health & Substance Abuse Services	93.959	HHS000779500006	4,605	4,605
Treatment Adult Services	93.959	HHS000779500002	530,596	530,596
Treatment Adult Services - Female	93.959	HHS000779500004	48,729	48,729
Passed through North Texas Behavioral Health Authority				
Co-Occuring Mental Health & Substance Abuse Services	93.959	HHS000779800004	6,933	6,933
Treatment Adult Services	93.959	HHS000779800002	379,182	379,182
Passed through LifePath Systems				
Treatment Adult Services	93.959	HHS000779800013	106,917	106,917
Passed through Harris County Hospital District	00.004	LIOUE COO	45.000	45.000
Healthcare for the Homeless	93.224	HCHD-229	45,000	45,000
U.S. Department of Labor	4	005000000000000000000000000000000000000		
Homeless Veterans Reeintegration Program - Stand Down	17.805	22560SD00009-01-00	3,281	3,281
Total Federal Awards			10 670 640	10 670 640
I Olai Federai Awarus			12,673,618	12,673,618

CENIKOR FOUNDATION Schedule of Expenditures of Federal and State Awards (Continued) For the Year Ended June 30, 2023

Federal and State Grantor/Pass-Through Grantor/Program or Cluster Title	Assistance Listing Number	Contract or Pass- through Grantor's I.D. Number	Current Year Expenditures	Current Year Revenues
Non-Federal Awards:				
Texas Health & Human Services Commission				
Co-Occuring Mental Health & Substance Abuse Services		HHS000663700010	9,385	9,385
Co-Occuring Mental Health & Substance Abuse Services		HHS000663700101	17,286	17,286
Co-Occuring Mental Health & Substance Abuse Services		HHS000663700201	32,428	32,428
Co-Occuring Mental Health & Substance Abuse Services		HHS000663700164	37,443	37,443
Co-Occuring Mental Health & Substance Abuse Services		HHS000663700285	7,774	7,774
Treatment Adult Services		HHS000663700225	189,013	189,013
Treatment Adult Services		HHS000663700235	377,744	377,744
Treatment Adult Services		HHS000663700242	968,639	968,639
Treatment Adult Services		HHS000663700246	634,798	634,798
Treatment Adult Services		HHS000663700248	850.599	850.599
Treatment Adult Services		HHS000663700284	40,497	40,497
Treatment Adult Services - Female		HHS000663700249	56,644	56,644
Treatment Adult Services - Female		HHS000663700250	57,602	57,602
Treatment Adult Services - Female		HHS000663700251	110,161	110,161
Treatment Adult Services - Female		HHS000663700252	184,803	184,803
Treatment Adult Services - Female		HHS000663700253	312,390	312,390
Treatment Youth Services		HHS000663700254	177,609	177,609
Treatment Youth Services		HHS000663700255	52	52
Youth Recovery Community Services		HHS000663700257	22,179	22,179
Youth Recovery Community Services		HHS000663700256	25,151	25,151
Youth Recovery Community Services		HHS000663700258	61,870	61,870
Passed through LifePath Systems				
Treatment Adult Services		HHS000779800013	61,614	61,614
Passed through North Texas Behavioral Health Authority				
Treatment Adult Services		HHS0007798000002	133,884	133,884
Passed through the City of Lubbock				
Co-Occuring Mental Health & Substance Abuse Services		HHS000779500006	862	862
Treatment Adult Services		HHS000779500002	184,316	184,316
Treatment Adult Services - Female		HHS000779500004	11,836	11,836
Texas Workforce Commission				
Self-Sufficiency Fund		2822SSF002	2,819	2,819
Texas Veterans Commission		OT \##		
Veterans Mental Health Grant		GT-VMH19-022	32,870	32,870
Texas Department of Criminal Justice				
Rehabilitation Treatment Services		696-PF-20-21-C021	122,319	122,319
Total Non-Federal Awards			4,724,586	4,724,586
Total Federal & Non-Federal Awards			\$ 17,398,203	\$ 17,398,203

Note 1. Basis of Presentation

The accompanying schedule of expenditures of federal and state awards (the Schedule) includes the federal and state grant activity of Cenikor Foundation (the Organization) and is presented on the accrual basis of accounting. The information in this schedule is presented in accordance with the audit requirements of *Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (the Uniform Guidance) and the Texas Grant Management Standards. Therefore, some amounts presented in the schedule may differ from amounts presented in or used in the preparation of the financial statements.

Note 2. Summary of Significant Accounting Policies

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles as found in the Uniform Guidance for federal awards and the Texas Grant Management Standards.

Note 3. Indirect Cost Rate

The Organization has elected to use the 10% de minimus indirect cost rate allowed under the Uniform Guidance effective July 1, 2021.

Note 4. Relationship to Financial Reports Submitted to Grantor Agencies

Amounts reflected in the financial reports filed with grantor agencies for the programs and the supplementary schedules may not agree because of accruals included in the next report filed with the agencies, matching requirements not included in the Schedule, and different program year ends.

Note 5. Subrecipients

There were no amounts provided to subrecipients for the year ended June 30, 2023.

CENIKOR FOUNDATION Schedule of Findings and Questioned Costs For the Year Ended June 30, 2023

Part I - Summary of Auditor's Results

Financial Statements

Type of Auditor's Report Issued:

Unmodified

Internal Control over Financial Reporting:

Material Weakness(es) Identified?

No

Significant Deficiency(ies) Identified not Considered

to be Material Weakness?

None Reported

Noncompliance Material to Financial Statements Noted?

No

Federal and State Awards

Internal Control over Major Programs:

Material Weakness(es) Identified?

No

Significant Deficiency(ies) Identified not Considered

to be Material Weakness?

None Reported

Type of Auditor's Report Issued on Compliance for Major Programs:

Unmodified

Any Audit Findings Disclosed that are Required to be Reported in Accordance

with 2 CFR 200.516(a)?

No

Identification of Major Programs:

Federal Program

U.S. Department of Health and Human Services Commission - Block Grants for Prevention and Treatment of Substance Abuse - Assistance Listing No. 93.959

State Program

Texas Health and Human Services Commission - Block Grants for Prevention and Treatment of Substance Abuse

Dollar Threshold used to Distinguish between Type A and Type B Programs:

Federal: \$750,000 State: \$750,000

Auditee Qualified as Low-Risk Auditee?

Yes

CENIKOR FOUNDATION Schedule of Findings and Questioned Costs (Continued) For the Year Ended June 30, 2023

Part II - Schedule of Financial Statement Findings Se	ction
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None.

Part III - Federal and State Awards Findings and Questioned Costs Section

None.

CENIKOR FOUNDATION Schedule of Prior Audit Findings and Questioned Costs For the Year Ended June 30, 2023

Part I - Financial Statement Findings

None.		
Part II - Federal and State A	Award Findings and Questioned Co	sts
None.		



Cenikor Prevention Policies and Procedures

- 1. YP services are to be documented in the Health and Human Services Commission (HHSC) Clinical Management Health Services (CMBHS) and the HSSC PATT system accurately. Submission of the program measures on or before the 15th of each month by the YP Supervisor, Manager, or Director.
- 2. YP team members are to document Prevention services in the Cenikor internal tracking system and in the HSSC required documentation system PATT and utilize other HHSC forms as required.
- 3. Prevention Supervisor, Manager, or Director will provide fidelity checks to ensure services are documented into the Cenikor internal tracking system as well as the HHSC required PATT.
- 4. Prevention Director will provide fidelity checks within CMBHS, Cenikor internal tracking system, and the HHSC required PATT.
- 5. YP Supervisor, Manager, or Director are to submit the Implementation Plan three times during the fiscal year as it appears in the Statement of Work.
- 6. YP team members are to use current HHSC forms to ensure documentation is up to date.
- 7. All YP team members and volunteers will receive criminal background checks prior to Cenikor onboarding per Texas Administrative Code (TAC) Title 25, Part 1, Chapter §448.60.
- 8. YP team members will receive the HHSC Prevention and Behavioral Health Promotion Guide, and a copy of the Statement of Work upon onboarding and sign that the SOW was received.
- 9. YP team members will receive Cenikor training as well as specific training to their position as stated in the HHSC contract and will be trained in the process to document Prevention services.
- 10. YP Supervisor, Manager, or Director are to secure Memorandum of Understandings (MOU) with school districts, and other community agencies, and organizations to begin services. MOU's are to be reviewed by the Prevention Director before obtaining signature by Cenikor CEO.
- 11. YP Program will develop partnerships with schools and other and organizations and provide communication with the contacts of these entities regarding the status of Prevention services.
- 12. YP team members will refer participants and families in need of additional resources outside of the Prevention services as stated in the SOW.
- 10. YP team members are to submit request for supplies to the Prevention Supervisor/Manager for approval with final approval by the Prevention Director before purchasing.
- 11. YP team members will participate in a weekly meeting with the Prevention Supervision/Manager to discuss and review latest service requests, updates from HHSC, and additional information related to the YP program.
- 12. Prevention team members will receive a performance evaluation every 60 days from the Prevention Manager/Supervisor through the Cenikor Big 5 process.
- 13. The Prevention Manager/ Supervisor will be available for team members outside of the Big 5 Performance process as needed to provide support related to the Prevention Specialist responsibilities.

- 14. The Prevention Manager/Supervisor will receive a performance evaluation every 60 days from the Prevention Director through the Big 5 process and be available as needed to provide support related to the Prevention Manager/Supervisor responsibilities.
- 15. YP team members, Prevention Supervisors/Managers/Directors will utilize Outlook calendar/TEAMS calendar current to reflect current schedule, HHSC meetings and trainings, school, community outreach and other collaboration meetings.
- 16. YP team members will participate in professional development to enhance skills and knowledge utilizing the Texas Prevention Training website including HHSC approved curriculum.
- 17. YP team members will participate in the Annual Prevention Providers Meeting.
- 18. Prevention Supervisor/Manager/Director will participate in the 1:1 meeting's with HHSC Program staff and other meetings with HHSC as scheduled.
- 19. YP team members and volunteers will adhere to written Ceikor policy and procedures on Confidentiality (Policy # 4165), and how to store and protect confidentiality of participant Information (Policy # 4155).
- 20. YP team members and volunteers (Policy# 210) will adhere to written Cenikor Policy and Procedures (Policy# 4045) ensuring that all Participants will respect and provide Prevention services in a respectful, and non-threatening manner.
- 21. YP team members will provide the Participant Rights documents provided by HHSC which states participants have the right to make a compliant to Cenikor or HHSC at any time.



The Cenikor YRC Plan for Virtual Learning:

Cenikor YRC will use Zoom as our official and preferred platform. If a participant or family cannot access zoom, we will accommodate to meet their needs.

A. Obtain consent form.

- 1) Hard copy option: Cenikor YRC will mail/drop off a hard copy to families, give to school which will distribute to families and have them return them within that same week. Cenikor YRC will then make a copy of this consent and either have the school return it to the family or the Cenikor YRC can mail it to them.
- 2) Email option: Cenikor YRC will email consent in a word document attachment. The families can either answer the information in the body of the email (not preferred but we want to make it as easy as possible on the families. If they choose this option the person in contact with the family will virtually put this information into a consent form, print it, and put in student's folder). Cenikor or YRC would prefer for the family to fill out the consent in the word doc and email it back to us.
- IMPORTANT: for all virtual consents the family must check something along the lines of: "by submitting this consent electronically all signers acknowledge that the electronic signature is equal to a manual signature"
- a) Peer leader. Individual session (preferred but not required): student meet with their peer leader one on one to go over the basics of YRC (review confidentiality, mandatory reporting, YRC rules, info about peer leader, what the semester will look like (days/ times of meeting, group or individual, expectations, etc.). While completing sessions with peer leaders, we ask that the participant have access and/or be provided with an electronic device such as a laptop, cell phone, tablet, etc. Also, we ask that the participant be in a safe, quiet, uninterrupted environment, so that confidentiality can be maintained for the participant and peer leader.
- b) Family coordinator Make initial contact with family, determine their best mode of communication, best times to contact them, if they are interested in individual or group support, education, basic needs, etc.
- B) Begin sessions. Team members will conduct virtual sessions from the YRCC at whatever time the team members and school have agreed upon. Team members will go over our mission statement, and some basic rules at the start of each meeting. These are to include disclosing that they are in a safe and confidential space. Groups are to proceed as they normally would on campus. As students transition back to their permanent school, we will continue meeting with them virtually, giving them updates on if and when the YRCC will open.

- If conducting a group outside of school time team members will share the additional intro reading including: expectations for virtual learning (camera, microphone, participation, and the safe word.

Due to the unforeseen circumstances of COVID-19, the Cenikor Foundation YRC program will begin the 2020 school year conducting virtual sessions. Youth will be able to engage in individual or group sessions while being a part of the discussion of the week.

Everything that is discussed in the sessions will be completely confidential and between the individuals on the call, Peer Recovery Leader, and/or Family Coordinator only. The only exceptions to confidentiality are if an individual is suspected of or admits to harming self or others, child or elder abuse and at that point the peer leader is legally required to make a report to the state.

As the calls are confidential for all participants, we ask that the participant partake in these weekly calls/sessions in a location by themselves. We ask that the participant have an operational microphone and camera.

If there are any occasions where the participant(s) cannot be alone during calls/sessions or does not have the proper equipment, please make us aware ahead of time, so that we can make proper accommodations for all participants in the session.

There will be a "Safe phrase/word" that can be chosen between the participant(s) when starting sessions. The safe phrase is put in place and to be said when the session is no longer safe or confidential, and it alerts the participant(s) to stop discussion immediately until it is okay to continue.

If you have any questions, please feel free to ask the YRC staff at any time. Lori Linn, YRC Manager llinn@cenikor.org



July 29, 2024

Dear City of San Marcos Human Services Board Members:

Texas State University Health Services partnered with Cenikor Foundation to establish the Student Recovery Alliance (SRA) at Texas State in October 2017. The program still offers recovery from drugs, alcohol and co-occurring disorders to Texas State students. SRA is open to all students in any level of recovery, or to those who wish to further explore sobriety. We host weekly one-hour meetings, semester events and socials to create connection and community.

The program at Texas State has benefited students by providing a safe space, social support, volunteer opportunities, SMART recovery tools, education, engaging sober activities and resources for treatment and counseling.

This is a critical component in providing recovery support for Texas State students. Texas State University Health Services would like to continue the partnership, expand the program and reach more students who need a dedicated support network of peers to support their recovery.

Please contact me at je12@txstate.edu or 512-245-1710 if you have any questions or need more supporting documents.

Sincerely,

Julie Eckert

Julia Eckert

Assistant Director, Texas State University Health Services Health Promotion Services

STUDENT HEALTH CENTER

601 University Drive | SHC | San Marcos, Texas 78666-4616

phone: 512.245.2161 | fax: 512.245.9288 | WWW.HEALTHCENTER.TXST.EDU

This letter is an electronic communication from Texas State University.



June 25, 2024
Carla Merritt | Cenikor Foundation
RE: Letter of Support

Dear Board Chair and Members:

On behalf of Community Action, Inc. of Central Texas and the Core Four Partnership, I am writing this letter of support for our community partner, the Cenikor Foundation, and their program described below:

Cenikor Prevention Services provide free, age-appropriate evidence-based curriculum to students of all ages. Students are taught the skills necessary to develop good self-esteem, resist peer and media pressure, and explore tobacco/alcohol/drug-free activities. Prevention Specialists provide presentations to schools, parent groups, community groups, and other venues as requested.

Participants will develop and strengthen skills through various Positive Alternative activities designed to provide bonding opportunities and enhance social/emotional learning and wellness. Participants will engage in a series of physical activities/games to promote team building and goal setting to increase confidence and resilience. Arts and crafts will also be offered to help manage/regulate emotions and provide opportunities for creative self- reflection and expression.

Topics can include:

Making healthy choices, creating healthy friendships, conflict resolution, mindfulness/coping with anger and anxiety, teambuilding, communication, social skills, assertiveness, resistance skills to overcome peer pressure, presentations featuring the dangers of substance use, abuse, misuse related to prescription drugs, tobacco/nicotine, alcohol, and marijuana (short and long-term health effects, laws, etc.), and the importance of adopting healthy stress relief strategies and self-care practices.

Our long-term partnership with Cenikor has been highly beneficial to the Core Four Partnership and Community Action, Inc. of Central Texas. They have supported SMTX Mental Health Coalition by serving on the steering committee and have been active supporters of the San Marcos Youth Task Force. They have provided support, services, and programming to many of our youth and young adults in the Greater San Marcos Area. Partnering with them has allowed us to leverage their expertise when discussing topics that are difficult for our youth. They provide a safe space and have an ability to connect with them. We hope to continue our partnership as the Core Four Partnership grows at Community Action, Inc. of Central Texas.

Sincerely

Cristal Lopez, MA

Youth Services Director | Core Four Partnership

Community Action, Inc. of Central Texas







HAYS COUNTY JUVENILE PROBATION DEPARTMENT

712 S. Stagecoach Trail, Ste. 1268 San Marcos, Texas 78666 (512) 393-7755 - Fax (512) 393-7775

To City of San Marcos Human Services Board Members,

Hays County Juvenile Probation has partnered with Cenikor Foundation Youth Recovery Community (YRC) program. The program is offered to adolescents ages 13-21 and encourages and promotes a lifestyle that is free from substance abuse. The program gives adolescents the opportunity to participate in individual and group sessions on a weekly basis in addition, it supports the adolescent's family through the recovery process.

The program has benefitted adolescents by providing them the skills they need to cope with the issues of life as it relates to substance use. In addition, the program gives adolescents a safe place to socialize and participate in structured activities that are beneficial and geared towards a successful recovery. With the increasing number of deaths and injuries amongst adolescents in our community due to substance use Cenikor Foundation and the YRC program gives us another resource to combat the substance abuse that has plagued our community. Hays County Juvenile Probation would like to continue our partnership with Cenikor Foundation to provide continued support for juveniles and their families.

Please contact me if at either 512-393-7755 or deshon.ridge@co.hays.tx.us if you have any questions.

Sincerely,

DeShon Ridge

Sr. Juvenile Probation Officer

Hays County Juvenile Probation