Form **990-T**

Department of the Treasury
Internal Revenue Service

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

For calendar year 2024 or other tax year beginning ..... , and ending .....

Go to *www.irs.gov/Form990T* for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

2024

Open to Public Inspection for 501(c)(3) Organizations Only

A ☐ Check box if address changed

B Exempt under section
☒ 501(C)(3)
☐ 408(e) ☐ 220(e)
☐ 408A ☐ 530(a)
☐ 529(a) ☐ 529A

Print or Type

Name of organization (☐ Check box if name changed and see instructions.)
SIT IN MOVEMENT, INC

Number, street, and room or suite no. If a P.O. box, see instructions.
134 S. ELM ST.

City or town, state or province, country, and ZIP or foreign postal code
GREENSBORO NC 27401

D Employer identification number
56-1856093

E Group exemption number (see instructions)

F ☐ Check box if an amended return.

C Book value of all assets at end of year 27,113,149

G Check organization type ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust ☐ State college/university
☐ 6417(d)(1)(A) Applicable entity

H Check if filing only to claim ☐ Credit from Form 8941 ☐ Refund shown on Form 2439 ☐ Elective payment amount from Form 3800

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ..... ☐

J Enter the number of attached Schedules A (Form 990-T) 1

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ..... ☐ Yes ☒ No
If "Yes," enter the name and identifying number of the parent corporation

L The books are in care of JOHN SWAINE Telephone number 336-274-9199

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Part I Total Unrelated Business Taxable Income

1	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	0
2	Reserved	2	
3	Add lines 1 and 2	3	
4	Charitable contributions (see instructions for limitation rules)	4	
5	Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	
6	Deduction for net operating loss. See instructions	6	0
7	Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	0
8	Specific deduction (generally $1,000, but see instructions for exceptions)	8	1,000
9	**Trusts.** Section 199A deduction. See instructions	9	
10	**Total deductions.** Add lines 8 and 9	10	1,000
11	**Unrelated business taxable income.** Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0

Part II Tax Computation

1	**Organizations taxable as corporations.** Multiply Part I, line 11, by 21% (0.21)	1	0
2	**Trusts taxable at trust rates.** See instructions for tax computation. Income tax on the amount on Part I, line 11, from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041)	2	0
3	**Proxy tax.** See instructions	3	
4a	Amount from Form 4255, Part I, line 3, column (q)	4a	
b	Other tax amounts. See instructions	4b	
5	Alternative minimum tax	5	
6	**Tax on noncompliant facility income.** See instructions	6	
7	**Total.** Add lines 3 through 6 to line 1 or 2, whichever applies	7	0

Part III Tax and Payments

1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a			
b	Other credits (see instructions)	1b			
c	General business credit. Attach Form 3800 (see instructions)	1c			
d	Credit for prior-year minimum tax (attach Form 8801 or 8827)	1d			
e	**Total credits.** Add lines 1a through 1d			1e	
2	Subtract line 1e from Part II, line 7			2	
3a	Amount from Form 4255, Part I, line 3, column (r) (see instructions)	3a			
b	Amount due from Form 8611	3b			
c	Amount due from Form 8697	3c			
d	Amount due from Form 8866	3d			
e	Other amounts due (see instructions)	3e			
f	Total amounts due. Add lines 3a through 3e			3f	
4	**Total tax.** Add lines 2 and 3f (see instructions). ☐ Check if includes tax previously deferred under section 1294. Enter tax amount here			4	0

Part III Tax and Payments *(continued)*

5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)			5
6a	Payments: Preceding year's overpayment credited to the current year	6a		
b	Current year's estimated tax payments. Check if section 643(g) election applies ☐	6b		
c	Tax deposited with Form 8868	6c		
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Elective payment election amount from Form 3800	6g		
h	Payment from Form 2439	6h		
i	Credit from Form 4136	6i		
j	Other (see instructions)	6j		
7	**Total payments.** Add lines 6a through 6j			7
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐			8
9	**Tax due.** If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed			9 0
10	**Overpayment.** If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid			10
11	Enter the amount of line 10 you want: **Credited to 2025 estimated tax** Refunded			11

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

		Yes	No
1	At any time during the 2024 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here		X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year $		
4	Enter available pre-2018 NOL carryovers here $. Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17, for the tax year. See instructions.		
6a	Reserved for future use		
b	Reserved for future use		

Business Activity Code	Available post-2017 NOL carryover
532000	$ 223,467
	$
	$
	$

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Part V Supplemental Information

Provide any additional information. See instructions.

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Earl Jones — Signature of officer | Date | VICE-CHAIRMAN — Title

Paid Preparer Use Only

Print/Type preparer's name: OLIVER W. BOWIE	Preparer's signature: OLIVER W. BOWIE Oliver Bowie	Date: 08/10/25	Check ☐ if self-employed; PTIN: P01378463
Firm's name: Oliver W. Bowie, LLC			Firm's EIN: 30-0958625
Firm's address: 1014 Homeland Ste 102 Greensboro, NC 27405			Phone no.: 336-273-9461

SCHEDULE A (Form 990-T)

Department of the Treasury
Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

Go to *www.irs.gov/Form990T* for instructions and the latest information.
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

2024

Open to Public Inspection for 501(c)(3) Organizations Only

A Name of the organization: SIT IN MOVEMENT, INC

B Employer identification number: 56-1856093

C Unrelated business activity code (see instructions): 532000

D Sequence: 1 of 1

E Describe the unrelated trade or business: Unrelated Business Activity

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales _____ b Less returns and allowances _____ c Balance	1c			
2 Cost of goods sold (Part III, line 8)	2			
3 Gross profit. Subtract line 2 from line 1c	3			
4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a			
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b			
c Capital loss deduction for trusts	4c			
5 Income (loss) from a partnership or an S corporation (attach statement)	5			
6 Rent income (Part IV)	6	611,004	887,435	-276,431
7 Unrelated debt-financed income (Part V)	7			
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8			
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9			
10 Exploited exempt activity income (Part VIII)	10			
11 Advertising income (Part IX)	11			
12 Other income (see instructions; attach statement)	12			
13 Total. Combine lines 3 through 12	13	611,004	887,435	-276,431

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Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income.			
1 Compensation of officers, directors, and trustees (Part X)		1	
2 Salaries and wages		2	
3 Repairs and maintenance		3	
4 Bad debts		4	
5 Interest (attach statement). See instructions		5	
6 Taxes and licenses		6	
7 Depreciation (attach Form 4562). See instructions	7		
8 Less depreciation claimed in Part III and elsewhere on return	8a	8b	0
9 Depletion		9	
10 Contributions to deferred compensation plans		10	
11 Employee benefit programs		11	
12 Excess exempt expenses (Part VIII)		12	
13 Excess readership costs (Part IX)		13	
14 Other deductions (attach statement)		14	
15 **Total deductions.** Add lines 1 through 14		15	
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)		16	-276,431
17 Deduction for net operating loss. See instructions		17	
18 **Unrelated business taxable income.** Subtract line 17 from line 16		18	-276,431

Part III Cost of Goods Sold

Enter method of inventory valuation

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	**Total.** Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	**Cost of goods sold.** Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	☐ Yes	☐ No

Part IV Rent Income (From Real Property and Personal Property Leased With Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A ☒ 100 S. ELM ST. GREENSBORO NC 27401

B ☐

C ☐

D ☐

		A	B	C	D
2	Rent received or accrued				
a	From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	611,004			
c	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D	611,004			

3 Total rents received or accrued. Add line 2c, columns A through D. Enter here and on Part I, line 6, column (A) 611,004

4 Deductions directly connected with the income in lines 2a and 2b (attach statement) 887,435

5 **Total deductions.** Add line 4, columns A through D. Enter here and on Part I, line 6, column (B) 887,435

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Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A ☐

B ☐

C ☐

D ☐

		A	B	C	D
2	Gross income from or allocable to debt-financed property				
3	Deductions directly connected with or allocable to debt-financed property				
a	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
c	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				

8 **Total gross income** (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)

9 Allocable deductions. Multiply line 3c by line 6

10 **Total allocable deductions.** Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)

11 **Total dividends — received deductions** included in line 10

Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

	1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations: 3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)						
(2)						
(3)						
(4)						

Nonexempt Controlled Organizations

	7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)					
(2)					
(3)					
(4)					
Totals				Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on Part I, line 8, column (B).

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

	1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)					
(2)					
(3)					
(4)					
Totals		Add amounts in column 2. Enter here and on Part I, line 9, column (A).			Add amounts in column 5. Enter here and on Part I, line 9, column (B).

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Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity:		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4	
5	Gross income from activity that is not unrelated business income	5	
6	Expenses attributable to income entered on line 5	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7	

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

A ☐ _____
B ☐ _____
C ☐ _____
D ☐ _____

Enter amounts for each periodical listed above in the corresponding column.

		A	B	C	D
2	Gross advertising income				
a	Add columns A through D. Enter here and on Part I, line 11, column (A)				
3	Direct advertising costs by periodical				
a	Add columns A through D. Enter here and on Part I, line 11, column (B)				
4	Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter -0- on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter -0-				
8	Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
a	Add line 8, columns A through D. Enter the greater of the line 8a columns total or -0- here and on Part II, line 13				

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Part X Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on Part II, line 1			

Part XI Supplemental Information (see instructions)

Form 990-T, Part IV, Line 5 - Post 2017 NOL Carryover Amounts

Activity Description	UBIT Num	Available Carryover
Unrelated Business Activity	532000	$ 223,467
Total		$ 223,467

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Unrelated Business Activity

Schedule A (990T), Part IV, Line 4 - Rent Expense Information

Description	Deduction
OFFICE RENTALS	$
Interest	311,760
Advertising	7,500
Repairs	102,494
Taxes	43,377
NON-EMPLOYEE COMPENSATION	
PROFESSIONAL FEES	19,000
TELEPHONE AND INTERNET	1,390
PRINTING	165
SUPPLIES	440
UTILITIES	113,933
INSURANCE	42,452
OTHER	
JANITORIAL	
DUMPSTER	
SECURITY	647
MISCELLANEOUS	266
SALARIES	
DEPRECIATION	244,011
Total	$ 887,835

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Form 990-T	Business Income Activity Summary	2024

Name: SIT IN MOVEMENT, INC

Taxpayer Identification Number: 56-1856093

Business Activity Income (and allocation of Prior-2018 NOL)

A. Total Pre-2018 Net Operating Losses Carried Forward	N/A	A.
B. Total Pre-2018 Net Operating Loss allocated to Sch A activities		B.
C. Total Pre-2018 Net Operating Loss allocated to Form 990-T, Line 6		C.
D. Pre-2018 Applied (Sum of B and C)		D.
E. Pre-2018 Remaining (Line A minus Line D)		E.
F. Pre-2018 Net Operating Losses Expiring this Year		F.
G. Pre-2018 Net Operating Losses Carried Forward		G.

	Unrelated Business Income Activity with Income	Code	Net Income	Allocated Pre2018 NOL
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.	All other revenue			
16.	Total taxable income			

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Business Activity Losses

	Unrelated Business Income Activity with Losses	Code	Current Year Loss
1.	Unrelated Business Activity	532000	-276,431
2.			
3.			
4.			
5.	All other activities		
6.	Totals		-276,431

Form 990-T	Schedule A Loss Carryover Calculation Description Unrelated Business Activity	2024

Name: SIT IN MOVEMENT, INC

Taxpayer Identification Number: 56-1856093

Unincorporated Business Income Tax Code: 532000 Activity: Rental and leasing services

Each activity may carryforward losses after 2018

1	Activity income	1	-276,431
2	Activity deductions	2	
3	Activities income or loss, after deductions	3	-276,431
4	Enter losses carried over to this year (no amounts prior to 2018) plus any carried-back amounts	4	223,467
5	Enter 80% of the amount on Line 3, if both lines 3 and 4 are positive.	5	
6	Take the lesser of Line 4 or Line 5. **Enter here and on Line 17 of Form 990-T, Sch A, Part II**	6	
7	Remaining losses to be carried forward to 2025 (Subtract Line 6 from line 4)	7	223,467
8	If line 3 is less than zero, enter that amount here as a positive number	8	276,431
9	Total loss carried forward to 2025 (Add lines 7 and 8)	9	499,898

Electronic Filing includes the report of additional amounts for this activity

E1	Post-2017 loss amounts from 2023, indefinite carryover (Reported with Form 990-T, Pt IV, with above UBIT code)	E1	223,467
E2	Prior year activity losses included on Schedule A, Line 17	E2	

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Form **990**

Two Year Comparison Report

For calendar year 2024, or tax year beginning , ending

2023 & 2024

Name

SIT IN MOVEMENT, INC

Taxpayer Identification Number

56-1856093

			2023	2024	Differences
Revenue	1. Contributions, gifts, grants	1.			
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.	335,575	118,035	-217,540
	4. Program service revenue	4.			
	5. Investment income	5.	185	140	-45
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.	123,269	-106,789	-230,058
	12. **Total revenue.** Add lines 1 through 11	12.	459,029	11,386	-447,643
Expenses	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.			
	16. Salaries, other compensation, and employee benefits	16.	5,822	72,874	67,052
	17. Professional fundraising fees	17.			
	18. Other professional fees	18.		10,635	10,635
	19. Occupancy, rent, utilities, and maintenance	19.	64,630	15,930	-48,700
	20. Depreciation and Depletion	20.			
	21. Other expenses	21.	822,672	713,010	-109,562
	22. **Total expenses.** Add lines 13 through 21	22.	893,024	812,449	-80,575
	23. **Excess or (Deficit).** Subtract line 22 from line 12	23.	-433,995	-801,063	-367,068
Other Information	24. Total exempt revenue	24.	459,029	11,386	-447,643
	25. Total unrelated revenue	25.	-166,487	-276,431	-109,944
	26. Total excludable revenue	26.	289,941	169,782	-120,159
	27. Total assets	27.	28,479,544	27,113,149	-1,366,395
	28. Total liabilities	28.	8,378,116	7,812,784	-565,332
	29. Retained earnings	29.	20,101,428	19,300,365	-801,063
	30. Number of voting members of governing body	30.	8	8	
	31. Number of independent voting members of governing body	31.	0	0	
	32. Number of employees	32.	0	0	
	33. Number of volunteers	33.	30	30	

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Form **990T**

Two Year Comparison Report

For calendar year 2024, or tax year beginning , ending

2023 & 2024

Name

SIT IN MOVEMENT, INC

Taxpayer Identification Number

56-1856093

			2023	2024	Differences
Business Taxable Income	1. Number of unrelated business activities for this return	1.	1	1	
	2. Unrelated business taxable income from all trades	2.			
	3. Charitable contributions	3.			
	4. Section 199A deduction (trusts only)	4.			
	5. Taxable income before NOL loss	5.			
	6. Net operating loss (pre-2018)	6.			
	7. Specific deduction	7.	1,000	1,000	
	8. Unrelated business taxable income.	8.			
Tax & Credits	9. Income tax (corporate or trust)	9.			
	10. Proxy tax	10.			
	11. Other taxes	11.			
	12. Total taxes	12.			
	13. Other credits	13.			
	14. General business credit	14.			
	15. Credit for prior year minimum tax	15.			
	16. Total credits	16.			
	17. Net tax after credits	17.			
	18. Recapture taxes and 965 tax	18.			
	19. Total Taxes	19.			
Due/Refund	20. Prior year overpayment and estimated tax payments	20.			
	21. Payment made with extension	21.			
	22. Backup withholding and foreign withholding	22.			
	23. Other payments	23.			
	24. Total payments	24.			
	25. Balance due/(Overpayment)	25.			
	26. Overpayment applied to next year	26.			
	27. Penalties	27.			
	28. Total due/(Refund)	28.			
	29. Activity Losses NOL (Post-2017)	29.	-166,487	-276,431	-109,944

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Form **SchA**(990T)

Two Year Comparison for Unrelated Business Activity

For calendar year 2024, or tax year beginning , ending

2023 & 2024

Organization Name
SIT IN MOVEMENT, INC

Taxpayer Identification Number
56-1856093

Activity: Unrelated Business Activity

Unincorporated Business Income Tax Code: 532000

			2023	2024	Differences
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rental income (net of expense)	4.	-166,487	-276,431	-109,944
	5. Unrelated debt-financed income (net of expense)	5.			
	6. Interest, and other income from controlled organizations (net of expense)	6.			
	7. Investment income of specific organizations (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.			
	10. Other income	10.			
	11. **Total trade or business income.** Combine lines 1 through 10	11.	-166,487	-276,431	-109,944
Expenses	12. Compensation of officers, directors, and trustees	12.			
	13. Other salaries and wages	13.			
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.			
	18. Depreciation and Depletion	18.			
	19. Contributions to deferred compensation plans	19.			
	20. Employee benefit programs	20.			
	21. Other deductions	21.			
	22. **Total deductions.** Add lines 12 through 21	22.			
	23. **Taxable income before deductions.** Subtract line 23 from 11	23.	-166,487	-276,431	-109,944
	24. Deductible losses	24.		223,467	223,467
	25. **Unrelated business taxable income (loss)**	25.	-166,487	-499,898	-333,411

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Form **990**

Tax Return History

2024

Name

SIT IN MOVEMENT, INC

Employer Identification Number

56-1856093

	2020	2021	2022	2023	2024	2025
Contributions, gifts, grants	274,589	541,457	6,117,184	335,575	118,035	
Membership dues						
Program service revenue						
Capital gain or loss						
Investment income			78	185	140	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue		155,730	261,120	123,269	-106,789	
Total revenue	274,589	697,187	6,378,382	459,029	11,386	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.						
Other compensation		157,625	180,849	5,382	72,874	
Professional fees		42,755	45,806		10,635	
Occupancy costs		13,807	48,613	64,630	15,930	
Depreciation and depletion						
Other expenses		428,193	585,223	822,572	713,010	
Total expenses		642,380	780,491	893,024	812,449	
Excess or (Deficit)	274,589	54,807	5,597,891	-433,995	-801,063	
Total exempt revenue	274,589	697,187	6,378,382	459,029	11,386	
Total unrelated revenue			-56,980	-166,487	-276,431	
Total excludable revenue		155,730	318,178	289,941	169,782	
Total Assets		16,350,411	29,450,267	28,479,544	27,113,149	
Total Liabilities		1,172,065	8,674,029	8,378,116	7,812,784	
Net Fund Balances	274,589	15,178,346	20,776,238	20,101,428	19,300,365	

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Form **990T** | **Tax Return History** | **2024**

Name: SIT IN MOVEMENT, INC

Employer Identification Number: 56-1856093

	2020	2021	2022	2023	2024	2025
UBTI from all trades	0	0	0	0	0	
Charitable contributions						
Net operating loss deduction						
Specific deduction			1,000	1,000	1,000	
Section 199A deduction (trusts)						
Income after deductions						
Income tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due /-Overpayment						

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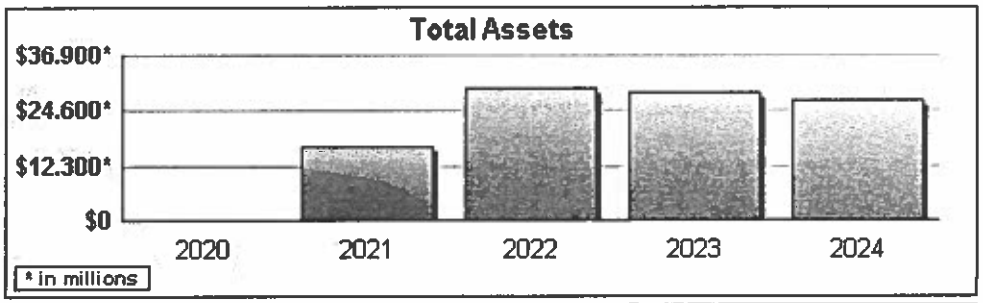

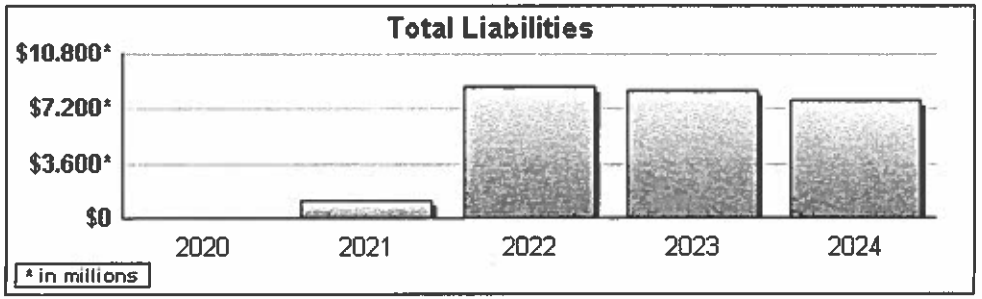

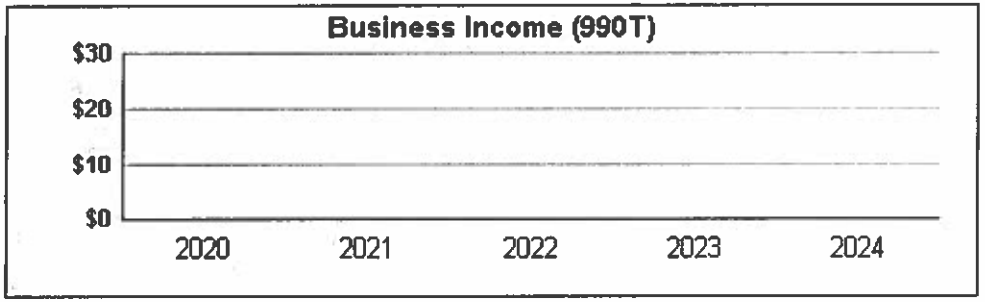

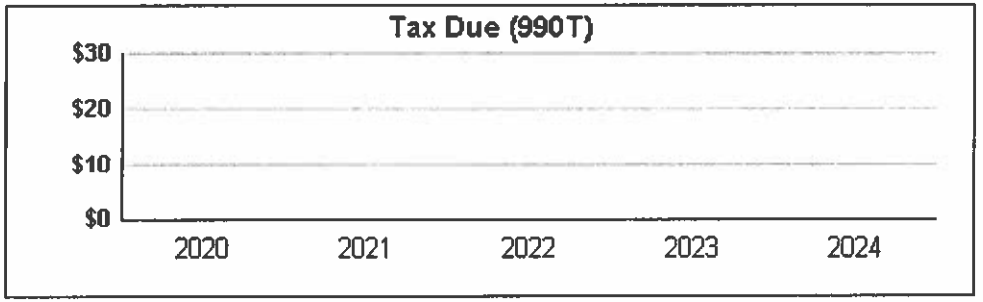

Taxable Interest on Investments

Description	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs ($ or %)
BANK	$ 140					
Total	$ 140					

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Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
PROGRAM EXPENSE	$ 21,170	$ 21,170	$	$
OFFICE EXPENSE	13,593	10,061	3,532	
EXHIBIT AND ARTIFACT EXPE	12,000	12,000		
MISCELLANEOUS	11,812	8,741	3,071	
SUPPLIES	5,675	4,199	1,476	
EQUIPMENT RENTAL	3,590	2,656	934	
BAD DEBT EXPENSE	3,165	3,165		
TELEPHONE & INTERNET	2,914	2,156	758	
PRINTING	2,571	1,903	668	
Total	$ 76,490	$ 66,051	$ 10,439	$ 0

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Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
OTHERS	$ 118,035
BOARD CONTRIBUTIONS	
Total	$ 118,035

Schedule A, Part II, Line 9(e)

Description	Amount
SPECIAL EVENTS	$
SPECIAL PROGRAMMING	4,782
OFFICE RENTALS	-276,431
Less: Deductions	-1,000
Total	$ -272,649

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Schedule A, Part II, Line 10(e)

Description	Amount
ANNUAL BANQUET	$ 132,420
Total	$ 132,420

Schedule A, Part II, Line 12 - Current year

Description	Amount
BANK	$ 140
MISCELLANEOUS	
GOLF TOURNAMENT	32,440
Total	$ 32,580