EXTENDED TO MAY 15, 2025 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 Open to Public

Inspection

Department of the Treasury

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

30, For the 2023 calendar year, or tax year beginning JUL 2023 and ending JUN 2024 C Name of organization D Employer identification number Check if applicable: Address change MOUSE INC. Name change 13-3973196 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ termin-ated 25 BROADWAY C/O TFA 12TH FL (646)574-6446City or town, state or province, country, and ZIP or foreign postal code 1,841,035. G Gross receipts \$ Amended return NEW YORK, NY 10004 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: LARRY LIEBERMAN Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 527 If "No," attach a list. See instructions 501(c) ((insert no.) 4947(a)(1) or MOUSE.ORG J Website: H(c) Group exemption number K Form of organization. X Corporation Trust Association Other Year of formation: 1997 **M** State of legal domicile: **NY** Part I Summary Briefly describe the organization's mission or most significant activities: EDUCATE AND INSPIRES STUDENTS Activities & Governance AND TEACHERS FROM HISTORICALLY UNDERSERVED COMMUNITIES TO SUCCEED IN if the organization discontinued its operations or disposed of more than 25% of its net assets. 15 Number of voting members of the governing body (Part VI, line 1a) 14 Number of independent voting members of the governing body (Part VI, line 1b) 4 19 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 200 Total number of volunteers (estimate if necessary) 6 7 a 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 7b Prior Year **Current Year** 858,700. 1,112,508. Contributions and grants (Part VIII, line 1h) Revenue $1,110,4\overline{71}$ 694,489. 9 Program service revenue (Part VIII, line 2g) 19,488. 34,038. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 56. 11 1,988,715 1,841,035. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,437,254. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,440,514. 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 498,402. 412,970. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,935,656. 1,853,484. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -12,449. 53,059. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** o 2,269,199. 2,108,360. Total assets (Part X, line 16) 439,502. 276,750. 21 Total liabilities (Part X, line 26) 829,697. 831,610 Net assets or fund balances. Subtract line 21 from line 20 | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is Under penalties of perjury, 1 deciate that there examined the rotation, including true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

105 / 14 / 2025 my the Signature of officer Date Sign LARRY LIEBERMAN, Here Type or print name and title Date Preparer leggrature PTIN Print/Type preparer's name 04/15/25 P00053187 MAROUS WHITE Paid self-employed SAX LLP Firm's EIN 81-2950760 Preparer Firm's name Firm's address 1040 AVENUE OF THE AMERICAS 16TH FLOOR Use Only Phone no. 212 - 268 - 2804 NEW YORK, NY 10018 X Yes May the IRS discuss this return with the preparer shown above? See instructions

Pai	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: MOUSE, A NEW YORK CITY-BASED NONPROFIT, EMPOWERS STUDENTS AND
	<u> </u>
	EDUCATORS WITH THE KNOWLEDGE AND SKILLS TO EXCEL IN AI, COMPUTER
	SCIENCE, AND TECHNOLOGY-DRIVEN CAREERS.
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
_	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 \$ 1,409,493. including grants of \$) (Revenue \$ 694,489.
	MOUSE IS A NONPROFIT ORGANIZATION LOCATED IN NEW YORK CITY THAT
	EDUCATES AND INSPIRES STUDENTS AND TEACHERS TO SUCCEED IN AI, COMPUTER
	SCIENCE, AND CAREERS IN TECH.
	TV 0 4
	FY24
	MOUSE'S MISSION IS TO MEASURABLY IMPACT ECONOMIC MOBILITY FOR YOUTH BY BUILDING ESSENTIAL PATHWAYS TO CAREER CONNECTED AI AND TECHNOLOGY
	EDUCATION. MOUSE DELIVERS INNOVATIVE, EVIDENCE-BASED,
	<u> </u>
	STANDARDS-ALIGNED, AND PROJECT-BASED LEARNING EXPERIENCES. OUR STUDENTS
	RECEIVE CAREER GUIDANCE FROM PROFESSIONALS, CURRENTLY WORKING IN TECH,
	AND FOLLOW A CURRICULUM THAT GUIDES THEM TO DEVELOP HARD AND SOFT WORKPLACE SKILLS, BUILD COMPUTATIONAL AGENCY, EXPLORE HOW MACHINE
41-	
4b	(Code:) (Expenses \$
	/O-d
40	(Code:) (Expenses \$
	Other program services (Describe on Schedule O.)
Tu	(Expenses \$ including grants of \$) (Revenue \$)
46	Total program service expenses 1,409,493.
	Form 990 (2022

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Form 990 (2023)

MOUSE INC.

Part IV	Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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	•		
Ū	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	Ü		
J	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		x
10	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		$ _{\mathbf{x}}$
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
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,		37	
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			,,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? 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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes, " complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
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		Х
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		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			Ė
	complete Schedule G, Part III	19		x
20a	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			\vdash
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		x
	democra government out rate by, column y y, into 1: 11 Tes. Complete Schedule I. Paris Fand II			

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Part IV Checklist of Required Schedules (continued) 13-3973196 Page 4

	· /		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	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		_X_
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			7.7
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			37
	Schedule L, Part I	25b		_X_
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%			v
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		_ <u>X</u> _
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			х
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	200		Х
h	"Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		
·		28c		Х
29	"Yes," complete Schedule L, Part IV	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
0 2	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	UZ		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
-	Part V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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?			
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 20	1		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	(2022)
		_	4 34 36 3	(0000)

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			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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		v
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	- -		х
	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	7с		Λ
d		7e		Х
e f		7f		X
g	If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	46		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans Start the amount of receives an head			
с 14а	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
		14b		
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	טדו		
	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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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 1a15			
	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			
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		X
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		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		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		X
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		11a	Х	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
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	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?		37	
a	The organization's CEO, Executive Director, or top management official	15a	Х	v
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			v
	taxable entity during the year?	16a		X
D	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	46h		
Sec	exempt status with respect to such arrangements? tion C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed NY			
		oply	ovoilal	20
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 for public inspection. Indicate how you made these available. Check all that apply.	оппу)	avalidi	NG.
10	(Lfinon	امزما	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year.	mian	Jai	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	LARRY LIEBERMAN - (646)574-6446			

Form **990** (2023)

NY

NEW YORK,

25 BROADWAY C/O TFA 12TH FL,

10004

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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	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than o	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 D	Key employee	Highest compensated	Former	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) LARRY LIEBERMAN CEO	40.00	x		х				201,041.	0.	34,888.
(2) CHELSEA FORMICA	40.00							,		,
CHIEF OF STAFF		1				Х		103,602.	0.	35,040.
(3) AMANDA ODONNELL	16.00									•
BOARD CHAIR		Х		Х				0.	0.	0.
(4) ROBIN GRIFFITHS	16.00									
TREASURER		X		Х				0.	0.	0.
(5) DAWN BARBER	16.00									
SECRETARY		X		Х				0.	0.	0.
(6) ADON DAVIS	16.00									
DIRECTOR		Х						0.	0.	0.
(7) AKBAR COOK	8.00									
DIRECTOR		Х						0.	0.	0.
(8) BLAZE WALESKI	16.00]								
DIRECTOR		Х						0.	0.	0.
(9) CAROLINE MCCARTHY	8.00]								
DIRECTOR		Х						0.	0.	0.
(10) CRAIG MEISNER	16.00									
DIRECTOR		Х						0.	0.	0.
(11) DOUG ROHDE	16.00	1						_	_	_
DIRECTOR		Х						0.	0.	0.
(12) JOY MARCUS	16.00	ļ						_		_
DIRECTOR	1.5.00	Х						0.	0.	0.
(13) MICHAEL VIRGIL	16.00	ļ						_		_
DIRECTOR	1.5.00	Х						0.	0.	0.
(14) MICHAEL VOSTRIZANSKY	16.00	l								
DIRECTOR		Х						0.	0.	0.
(15) OMARI EDWARDS	8.00	٠,,								_
DIRECTOR	1000	Х						0.	0.	0.
(16) SLOANE BARBOUR	8.00	.						_	_	_
DIRECTOR		Х	_				_	0.	0.	0.
		1								

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	t VII Section A. Officers, Directors, Trus	(B)	l	 ,		<u>, mi</u> C)	9110						(E)	
	(A) Name and title	Average hours per	box	not c	Pos heck i ss per	itior more rson i	than is bot	h an	(D) Reportable compensation	(E) Reportable compensatio			(F) stimate nount	
		week (list any	<u> </u>	cer ar	nd a d	irecto	or/trus	stee)	from the	from related organization		com	other pensa	tion
		hours for related	Individual trustee or director	stee			sated		organization (W-2/1099-MISC/	(W-2/1099-MIS 1099-NEC)		l	rom the	
		organizations below	al truste	Institutional trustee		ployee	Highest compensated employee		1099-NEC)	10001120)		an	d relat	ed
		line)	Individ	Institut	Officer	Key employee	Highest	Former				orga	anizati	ons
	Subtotal								304,643.		0.	6	9,9:	28.
	Total from continuation sheets to Part VI	I, Section A							0.		0.			0.
<u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but n								304,643.	000 of reportable	0.	6	9,9	28.
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director, trust	ee, k	кеу є	empl	loye	e, oı	hig	hest compensated emp	loyee on			162	NO
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su								or componentian from t			3		X
7	and related organizations greater than \$150											4	Х	
5	Did any person listed on line 1a receive or a	accrue comper	ısati	on fi	rom	any	unr							Х
Sec	rendered to the organization? If "Yes." com tion B. Independent Contractors	iplete Schedule	9 <i>J t</i>	or st	ich t	oers	on					5		
1	Complete this table for your five highest co the organization. Report compensation for	-									oensa	tion fro	om	
	(A) Name and business					шт	JI W		The organization's tax y (B) Description of s				C) nsatio	
	Name and business	address	INC	INC	<u> </u>				Description of	iei vices		Jonipe	Hoatio	
	Total number of independent contractors (i	ncluding but n	ot lir	nited	d to	thos	se lis	sted	above) who received mo	ore than				
	\$100,000 of compensation from the organi.	zation				()							

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MOUSE INC.

Form 990 (2023)
Part VIII

Statement of Revenu	е
---------------------	---

		Check if Schedule O co	ntains a respo	nse	or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
S (5	1 4	Federated campaigns	1a						
in Sir									
5 2		·							
A,		Fundraising events							
듩늍			1d		204 500				
ž,	•	 Government grants (contrib 	utions) 1e		324,500.				
ËΖ	1	All other contributions, gifts, gr	ants, and						
the the		similar amounts not included a	bove 1f		788,008.				
들었	Ç	Noncash contributions included in lin	es 1a-1f 1g	\$					
Contributions, Gifts, Grants and Other Similar Amounts	ı	Total. Add lines 1a-1f				1,112,508.			
					Business Code				
в	2 8	PROGRAM INCOME	}		611600	694,489.	694,489.		
_ kic	ŀ					•			
Ser									
E 3	`								
gra Be									
Program Service Revenue	•								
_		All other program service re	venue			694,489.			
_		Total. Add lines 2a-2f				034,403.			
	3	Investment income (includir	-			24 020			24 020
						34,038.			34,038.
	4	Income from investment of	•	nd p	roceeds				
	5	Royalties							
			(i) Rea	l	(ii) Personal				
	6 a	a Gross rents	6a						
	ŀ	Less: rental expenses	6b						
	•	Rental income or (loss)	6c						
		Net rental income or (loss) .							
		Gross amount from sales of	(i) Securi	ties	(ii) Other				
		assets other than inventory	7a						
		Less: cost or other basis							
a l	•		7b						
ᇍ			7c						
e		· /							
ther Revenue		Net gain or (loss)			T				
	8 8	a Gross income from fundraising	•						
0		including \$							
		contributions reported on li							
		Part IV, line 18		8a					
		Less: direct expenses		8b					
	•	Net income or (loss) from fu	ındraising eve	nts_					
	9 a	a Gross income from gaming	activities. See						
		Part IV, line 19		9a					
	ŀ	Less: direct expenses		9b					
		Net income or (loss) from ga	aming activitie	s					
	10 a	Gross sales of inventory, les	ss returns						
		and allowances		10a					
	ŀ	Less: cost of goods sold		10b					
		Net income or (loss) from sa							
	`	The modifie of (1000) from ou	2100 01 11101110	· y	Business Code				
ns	11 a	.							
Miscellaneous Revenue	11 c			_					
Ke ja				_					
Sc		All other revenue							
Σ		Total. Add lines 11a-11d							
	12	Total revenue. See instruction				1,841,035.	694.489.	0.	34,038.

332009 12-21-23

Form 990 (2023) MOUSE INC. | Part IX | Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must compl			nplete column (A).	
	Check if Schedule O contains a respons			(0)	
	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,				
	trustees, and key employees	254,887.	203,909.	25,489.	25,489.
6	Compensation not included above to disqualified	,	,	,	•
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	924,871.	751,682.	118,469.	54,720.
8	Pension plan accruals and contributions (include	,			,01
•	section 401(k) and 403(b) employer contributions)	30,600.	24.954	4.104.	1.542.
9	Other employee benefits	137,714.	24,954. 111,789.	4,104. 17,339.	8 586
10	Payroll taxes	92,442.	74,905.	11,342.	1,542. 8,586. 6,195.
11	Fees for services (nonemployees):	20,440	, = , 5 0 5 0	<u> </u>	0,150.
a	Management	22.		22.	
b	Legal	61,425.		61,425.	
C	Accounting	56,000.	56,000.	01,423.	
d	Lobbying	30,000.	30,000.		
e	Professional fundraising services. See Part IV, line 17	4,772.		4,772.	
f	Investment management fees	4,//4.		4,114.	
g	Other. (If line 11g amount exceeds 10% of line 25,	140 001	70 545	70 426	
	column (A), amount, list line 11g expenses on Sch O.)	142,981.	72,545.	70,436.	
12	Advertising and promotion	20 472	16 500	0 F11	1 272
13	Office expenses	20,473.	16,590.	2,511.	1,372. 1,214.
14	Information technology	18,122.	14,685.	2,223.	1,214.
15	Royalties	15 100	10 042	1 052	1 012
16	Occupancy	15,109.	12,243.	1,853.	1,013.
17	Travel	37,808.	37,444.	53.	311.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			4 2 7 4	
20	Interest	4,074.		4,074.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,980.	1,604.	243.	133.
23	Insurance	7,415.	6,008.	910.	497.
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	WORKSHOP SUPPLIES	15,990.	15,990.		
a b	MISCELLANEOUS	15,513.	10,000	15,513.	
	STAFF TRAINING & DVMT	11,286.	9,145.	1,385.	756.
q	DIZITI TIMILING & DVIII	11,200•	J,14J•	1,303.	750•
d	All other expenses				
0E	All other expenses Add lines 1 through 2/4s	1 052 404	1,409,493.	342,163.	101,828.
25	Total functional expenses. Add lines 1 through 24e	1,853,484.	1,403,433.	344,103.	±∪⊥,δ∠δ.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2023)
Part X | Balance Sheet MOUSE INC. 13-3973196 Page 11

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			112,702.	1	218,280.
	2	Savings and temporary cash investments			275,119.	2	267,481
	3	Pledges and grants receivable, net	279,000.	3	504,500		
	4	Accounts receivable, net		561,217.	4	44,864	
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t		5			
	6	Loans and other receivables from other disquared	ualified pe	rsons (as defined			
		under section 4958(f)(1)), and persons descri	bed in sec	etion 4958(c)(3)(B)		6	
ş	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	Donated as a second defended absorber			15,980.	9	4,729.
	10a	Land, buildings, and equipment: cost or other	er	Ι			
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b	282,097.	2,998.	10c	2,748.
	11	Investments - publicly traded securities			768,803.	11	2,748. 812,378.
	12	Investments - other securities. See Part IV, lin				12	
	13	Investments - program-related. See Part IV, li	ine 11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	253,380.	15	253,380.		
	16	Total assets. Add lines 1 through 15 (must e			2,269,199.	16	2,108,360.
	17	Accounts payable and accrued expenses	165,391.	17	69,194.		
	18	Grants payable				18	
	19	Deferred revenue			124,111.	19	57,556
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple	ete Part IV	of Schedule D		21	
Ş	22	Loans and other payables to any current or f	ormer offi	cer, director,			
Liabilities		trustee, key employee, creator or founder, su	ubstantial	contributor, or 35%			
jabi		controlled entity or family member of any of t	these pers	ons		22	
_	23	Secured mortgages and notes payable to un	related th	rd parties	150,000.	23	150,000.
	24	Unsecured notes and loans payable to unrela	ated third	parties		24	
	25	Other liabilities (including federal income tax	, payables	to related third			
		parties, and other liabilities not included on li	ines 17-24). Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			439,502.	26	276,750.
		Organizations that follow FASB ASC 958,	check he	e X			
Çes		and complete lines 27, 28, 32, and 33.			4 004 605		1 001 (10
la l	27	Net assets without donor restrictions		1,804,697.	27	1,831,610.	
ä	28	Net assets with donor restrictions			25,000.	28	0.
Ē		Organizations that do not follow FASB AS	C 958, ch	eck here			
Ē		and complete lines 29 through 33.					
ts o	29	Capital stock or trust principal, or current fur				29	
se	30	Paid-in or capital surplus, or land, building, o				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated		—	1 000 00=	31	4 004 64 5
Se	32	Total net assets or fund balances			1,829,697.	32	1,831,610.
	33	Total liabilities and net assets/fund balances			2,269,199.	33	2,108,360.

13-3973196 Page **12** MOUSE INC. Form 990 (2023)

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	1,84		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,85	3,4	84.
3	Revenue less expenses. Subtract line 2 from line 1	3		2,4	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,82		
5	Net unrealized gains (losses) on investments	5	1	4,3	62.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,83	1,6	<u> 10.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X 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	audit,			
	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 Scho	edule O.			
3a	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?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023
Open to Public

Inspection
Employer identification number

		E INC.					<u> </u>	<u>3-3973196</u>
Part I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.		
The orga	– nization is not a private found	lation because it is: (I	For lines 1 through 12, cl	heck only	one box.)			
1	A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	1)(A)(i).		
2	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	ו (990 ר				
3	A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4	A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	on 170(b)(1)(A)(ii	ii). Enter	the hospital's name,
	city, and state:							
5	An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	vernmental unit	describe	ed in
	section 170(b)(1)(A)(iv). (0	Complete Part II.)						
6	A federal, state, or local go	vernment or governm	nental unit described in s	section 17	70(b)(1)(A)	(v).		
7 X	An organization that norma	ılly receives a substaı	ntial part of its support fr	om a gove	ernmental	unit or from the	general p	oublic 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 Parl	t II.)				
9	An agricultural research org	ganization described	in section 170(b)(1)(A)(i	ix) operate	ed in conju	unction with a la	nd-grant	college
	or university or a non-land-o	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of th	e college	or
	university:							
10	An organization that norma	ılly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership	fees, and	d gross receipts from
	activities related to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its s	support fi	rom gross investment
	income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the orgar	nization a	fter June 30, 1975.
	See section 509(a)(2). (Co	mplete Part III.)						
11	An organization organized a	and operated exclusi	vely to test for public saf	fety. See	section 50	09(a)(4).		
12	An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to carry	out the	purposes of one or
	more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section :	509(a)(2).	See section 50	9(a)(3). 🤇	Check the box on
	lines 12a through 12d that	describes the type of	f supporting organizatior	and com	plete lines	12e, 12f, and 1	2g.	
a _	Type I. A supporting orga	anization operated, s	upervised, or controlled l	by its supp	oorted org	anization(s), typ	ically by	giving
	the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	ctors or trustees	of the su	ıpporting
	organization. You must o	complete Part IV, Se	ections A and B.					
b _	Type II. A supporting org	anization supervised	or controlled in connect	ion with it	s supporte	ed organization(s	s), by hav	ring
	control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage	the supp	ported
	organization(s). You mus	t complete Part IV,	Sections A and C.					
с _	Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally	integrate	d with,
	its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ections A,	D, and E.		
d _	Type III non-functionally	, integrated. A supp	orting organization oper	ated in co	nnection w	vith its supporte	d organiz	zation(s)
	that is not functionally int		•	•		•	n attentiv	/eness
_	requirement (see instruct	,	•	•				
e	Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II,	Type III	
	functionally integrated, or	r Type III non-functio	nally integrated supportir	ng organiz	ation.			
	ter the number of supported of							
g Pro	ovide the following information (i) Name of supported	n about the supporte	d organization(s). (iii) Type of organization	(iv) Is the oras	anization listed	(v) Amount of m	onotani	(vi) Amount of other
	organization	(11) [11]	(described on lines 1-10	in your governi	ing document?	support (see inst	-	support (see instructions)
			above (see instructions))	Yes	No			,
 Total								
iviai		<u> </u>	<u> </u>					l .

332021 12-21-23

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1487888.	1209374.	1072295.	858,700.	1112508.	5740765.
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	1487888.	1209374.	1072295.	858,700.	1112508.	5740765.
	The portion of total contributions				0007.000		3,10,000
Ū	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,						
							1047788.
e	** ************************************						4692977.
	Public support. Subtract line 5 from line 4.						4032311.
		(a) 2010	(b) 2020	(a) 2021	(4) 2022	(a) 2022	/f\ Total
	ndar year (or fiscal year beginning in)	(a) 2019 1487888.	(b) 2020 1209374.	(c) 2021 1072295.	(d) 2022 858,700.	(e) 2023 1112508.	(f) Total 5740765.
	Amounts from line 4	140/000.	12073740	10/22/50	030,700.	1112500.	3740703.
0	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	0 003	0 722	7 000	10 400	24 020	00 240
	and income from similar sources	9,893.	9,722.	7,099.	19,488.	34,038.	80,240.
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	0 040	4 4 5 4	F 4	F.C.		11 446
	assets (Explain in Part VI.)	9,842.	1,474.	74.	56.		11,446.
	Total support. Add lines 7 through 10					1 4	5832451.
	Gross receipts from related activities,						<u>,588,092.</u>
13	First 5 years. If the Form 990 is for the	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)	
<u> </u>	organization, check this box and stop						
	ction C. Computation of Public						00 16
	Public support percentage for 2023 (li					14	80.46 %
	Public support percentage from 2022					15	85.41 %
16a	33 1/3% support test - 2023. If the o						TT.
	stop here. The organization qualifies a		•				
b	33 1/3% support test - 2022. If the o						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the facts		,	•	•	VI how the organiz	ation
	meets the facts-and-circumstances te	•			•		
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets th				•		
	organization meets the facts-and-circu						
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar		(Form 000) 2023

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.)

Calen	ıdar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	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						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	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						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	idar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
	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.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third, t	ourth, or fifth tax y	year as a section 5	01(c)(3) organizatio	on,
500	check this box and stop heretion C. Computation of Publi						
				aluman (f))		15	
	Public support percentage for 2023 (li Public support percentage from 2022					16	<u>%</u>
	tion D. Computation of Inves					10	90
	Investment income percentage for 20			no 13 column (fl)		17	%
	Investment income percentage from 2					18	
	33 1/3% support tests - 2023. If the			on line 14, and line			
	more than 33 1/3%, check this box ar						
	33 1/3% support tests - 2022. If the	· ·	•	, ,			 nd
	line 18 is not more than 33 1/3%, che	•					
	Private foundation. If the organization						

332023 12-21-23

Schedule A (Form 990) 2023 MOUSE INC. 13-3973196 Page 4

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		
3c		
00		
4a		
4b		<u> </u>
4c		
70		
5a		
5b		
5c		
6		
7		
7		
8		
9a		
L		
9b		
9c		
30		
10a		
10b		

Par	t IV 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		<u> </u>
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		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in 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		\sqcup	igsquare
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	igwdown	<u> </u>
	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,		\vdash	
Soot	supervised, or controlled the supporting organization.	2		
Seci	ion C. Type II Supporting Organizations			
_			Yes	No
	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	1	\vdash	
	the supported organization(s). ion D. All Type III Supporting Organizations		ш	
0000	Ton D. Air Type in Supporting Significations		Yes	No
4	Did the arganization provide to each of its supported arganizations, by the last day of the fifth month of the		168	No
	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		\Box
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•	\vdash	
	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		
	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		
Sect	ion 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 year (see instruction	 is).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instruction	s).	
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	<u> </u>	igsquare	
	that these activities constituted substantially all of its activities.	2a		<u> </u>
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	<u> </u>	igsqcup	
	these activities but for the organization's involvement.	2b	igsquare	<u> </u>
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	<u> </u>	$\sqcup \sqcup$	
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a	igsqcup	<u> </u>
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	1	1 1	i 1

Schedule A (Form 990) 2023

3b

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

13-3973196 Page 6 MOUSE INC. Schedule A (Form 990) 2023

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	izations	Y
1	Check here if the organization satisfied the Integral Part Test as a qualify	ng trust on N	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		•	•
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):			
a	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			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	d Type III supporting orga	nization (see

Schedule A (Form 990) 2023

instructions).

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Schedule A (Form 990) 2023 MOUSE INC.

Par	t v Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued	()
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			2
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3	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	ne organization is responsive		
	(provide details in Part VI). See instructions.			8
9	Distributable amount for 2023 from Section C, line 6		!	9
10	Line 8 amount divided by line 9 amount		1	0
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
с	From 2020			
d	From 2021			
е	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2023 distributable amount			
i_	Carryover from 2018 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
<u>a</u>	Excess from 2019			
b	Excess from 2020			
с	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

SCHEDULE C (Form 990)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

2023

OMB No. 1545-0047

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501 (h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer identification number MOUSE INC. 13-3973196 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures 3 Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? Yes No b If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2023 MOUSE INC. 13-3973196 Page 2 Part II-A | Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). if the filing organization checked box A and "limited control" provisions apply. Check (a) Filing (b) Affiliated group **Limits on Lobbying Expenditures** organization's totals (The term "expenditures" means amounts paid or incurred.) totals **1a** Total lobbying expenditures to influence public opinion (grassroots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: not over \$500,000, 20% of the amount on line 1e. over \$500,000 but not over \$1,000,000, \$100,000 plus 15% of the excess over \$500,000. over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000. over \$1,500,000 but not over \$17,000,000, \$225,000 plus 5% of the excess over \$1,500,000. over \$17,000,000. \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0i Subtract line 1f from line 1c. If zero or less, enter -0ighthere is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? No 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar vear (a) 2020 (b) 2021 (c) 2022(d) 2023 (e) Total (or fiscal year beginning in) 2a Lobbying nontaxable amount

Schedule C (Form 990) 2023

b Lobbying ceiling amount (150% of line 2a, column(e))

c Total lobbying expenditures

d Grassroots nontaxable amounte Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(1	b)
of th	e lobbying activity.	Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
С	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X		
е	Publications, or published or broadcast statements?		X		
f	Grants to other organizations for lobbying purposes?		X		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		56	5,000.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i	Other activities?		X		
j	Total. Add lines 1c through 1i			56	5,000.
2a	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X		
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
ı uı	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered '				3, is
	answered "Yes."				•
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
	expenses for which the section 527(f) tax was paid).			_	
	Current year				
b	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po			_	
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
	t IV Supplemental Information				
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1	and 2 (see	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
PAI	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
DOI	MON OF TOUNG OUR COMMRAGMOR MUAR LORDING ON OUR R	13113 T 13	HOD (3 T M 37	
ROI	TON ST. JOHNS, OUR CONTRACTOR THAT LOBBIES ON OUR B	EHALF	FOR (T.I.A	
حمت	INCTI.				
<u> </u>	JNCIL.				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

Employer identification number

	MOUSE INC.			13-3973196
Pai		Funds or Other Similar Funds	or Ac	
	organization answered "Yes" on Form 990, Part IV, line	6.		•
		(a) Donor advised funds	(1) 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	tion that the second hald in dames advis		
5	Did the organization inform all donors and donor advisors in wri	-		
_	are the organization's property, subject to the organization's ex			
6	Did the organization inform all grantees, donors, and donor adv			
	for charitable purposes and not for the benefit of the donor or o	lonor advisor, or for any other purpose	conferri	
П	impermissible private benefit?			Yes No
Pa			Part IV,	line /.
1	Purpose(s) of conservation easements held by the organization	·		
	Preservation of land for public use (for example, recreation			rically important land area
	Protection of natural habitat	Preservation o	of a certif	ied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form	of a cor	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic struc-	ture included on line 2a		2c
d	Number of conservation easements included on line 2c acquire	d after July 25, 2006, and not		
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, relea			ation during the tax
	year			
4	Number of states where property subject to conservation easer	nent is located		
5	Does the organization have a written policy regarding the period	dic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it he	olds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha			
7	Amount of expenses incurred in monitoring, inspecting, handlin	g of violations, and enforcing conserva	ation eas	ements during the year
8	Does each conservation easement reported on line 2d above sa	atisfy the requirements of section 170(h	n)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation			ent and
	balance sheet, and include, if applicable, the text of the footnot	e to the organization's financial statem	ents tha	t describes the
	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of A	art, Historical Treasures, or O	ther Si	milar Assets.
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958,	not to report in its revenue statement a	and bala	nce sheet works
	of art, historical treasures, or other similar assets held for public	exhibition, education, or research in f	urtheran	ce of public
	service, provide in Part XIII the text of the footnote to its financi	al statements that describes these iten	ns.	
b	If the organization elected, as permitted under FASB ASC 958,	to report in its revenue statement and	balance	sheet works of
	art, historical treasures, or other similar assets held for public e	xhibition, education, or research in furt	herance	of public service,
	provide the following amounts relating to these items.	•		
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical treas			
_	the following amounts required to be reported under FASB ASC		, P	
я	Revenue included on Form 990, Part VIII, line 1	_		\$
b				
	, 100010 11 101010 000, 1 WILA			🕊

332051 09-28-23

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

MOUSE INC. 13-3973196 <u>Schedule D (Form 990) 20</u>23 Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply). Public exhibition Loan or exchange program Scholarly research h Other Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? No Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? No Yes **b** If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c 1d d Additions during the year Distributions during the year 1e 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (c) Two years back (d) Three years back (e) Four years back (b) Prior year **1a** Beginning of year balance **b** Contributions c Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs f Administrative expenses End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment **b** Permanent endowment _ Term endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the No organization by: (i) Unrelated organizations? (ii) Related organizations? 3a(ii)

4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment

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

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

	,	,	, ,	
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		183,262.	180,514.	2,748.
e Other		101,583.	101,583.	0.
Total. Add lines 1a through 1e. (Column (d) must equa	l Form 990 Part X line 1	Oc. column (B))		2,748.

13-3973196 Page 3

|--|

		11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
B) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Fotal. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line ⁻	11d. See Form 990, Part X, line 15.	
(a) [escription		(b) Book value
(a) [(1) EMPLOYEE RETENTION TAX CRE	<u> </u>		, ,
(1) EMPLOYEE RETENTION TAX CRE	<u> </u>		, ,
(1) EMPLOYEE RETENTION TAX CRE (2)	<u> </u>		, ,
(1) EMPLOYEE RETENTION TAX CRE (2) (3)	<u> </u>		, ,
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4)	<u> </u>		• •
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5)	<u> </u>		• •
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6)	<u> </u>		• •
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7)	<u> </u>		• •
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8)	<u> </u>		, ,
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9)	DIT RECEIVABL		253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col.	DIT RECEIVABL		(b) Book value 253,380 253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of the complete if the organization and the complete if the organization and the complete if the organization and the complete if the complete if the organization and the complete if the complete if the comple	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of the complete if the organization of liability	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of the interval of the column	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of the complete if the organization of liability (1) Federal income taxes (2)	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of the image of	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of the organization of liability (1) Federal income taxes (2) (3) (4)	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of the organization of liability (1) Federal income taxes (2) (3) (4) (5)	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of I. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	DIT RECEIVABL	,E	253,380
(1) EMPLOYEE RETENTION TAX CRE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities Complete if the organization answered "Yes" of the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	(B)) n Form 990, Part IV, line	Ite or 11f. See Form 990, Part X, line 25	253,380

Pai	T XI Reconciliation of Revenue per Audited Financial State		Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1				1	2,029,355.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1			
а	Net unrealized gains (losses) on investments		14,362.		
b	Donated services and use of facilities		178,730.		
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	193,092.
3	Subtract line 2e from line 1			3	1,836,263.
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	4,772.]	
b	Other (Describe in Part XIII.)	4b			
C	Add lines 4a and 4b			4c	4,772.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,841,035.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stat	ements With	Expenses per F	Returr	1
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total expenses and losses per audited financial statements			1	2,027,442.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	178,730.]	
b	Prior year adjustments	2b]	
С	Other losses	2c]	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	178,730.
3	Subtract line 2e from line 1			3	1,848,712.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4,772.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	4,772.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line 18.)			5	1,853,484.
Pa	rt XIII Supplemental Information				
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV, lines 1b a	and 2b; Part V, line 4	; Part >	(, line 2; Part XI,
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	additional inform	ation.		
PAI	RT X, LINE 2:				
JON	JSE INC. DOES NOT BELIEVE ITS FINANCIAL S	STATEMENT	'S INCLUDE	ANY	MATERIAL,
JNC	CERTAIN TAX POSITIONS. TAX RETURNS FOR P	ERIODS EN	DING JUNE	30,	2021 AND
LA'	TER ARE SUBJECT TO EXAMINATION BY APPLICA	ABLE TAXI	NG AUTHORI	TIES	5.

SCHEDULE J (Form 990)

Department of the Treasury

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

2023

Open to Public Inspection

Name of the organization

MOUSE INC.

Employer identification number 13-3973196

Pa	art I Questions Regarding Compensation					
			Yes	No		
1a	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?					
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 X 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		Х		
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		X		
	Any related organization?	6b		Х		
	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		Х		
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		Х		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					
	Regulations section 53 4958-6(c)?	9		1		

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

Schedule J (Form 990) 2023 MOUSE INC.

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-2 and/or 1099-MISC and/or 1099-NEC compensation	-2 and/or 1099-MISC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)·(D)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) LARRY LIEBERMAN	Ξ	201,04	0.	.0	15,400.	19,488.	235,929.	0.
CEO	(ii)		• 0	• 0	• 0	• 0	• 0	• 0
	Ξ							
	(ii)							
	Ξ							
	Œ							
	Ξ							
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339119 11.08.23							Schedt	Schedule J (Form 990) 2023

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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.

2023
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

MOUSE INC.

Employer identification number 13-3973196

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
COMPUTER SCIENCE AND HIGH-TECH CAREERS.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
LEARNING WORKS, AND DEVELOP AI-POWERED SOLUTIONS.
AI DESIGN LEAGUE
SINCE 2021, MORE THAN 12,000 NEW YORK CITY PUBLIC SCHOOLS STUDENTS HAVE
SUCCESSFULLY COMPLETED MOUSE'S RIGOROUS AI DESIGN LEAGUE COURSE.
AI DESIGN LEAGUE IS A HANDS-ON AI, COMPUTER SCIENCE, AND TECHNOLOGY
EDUCATION COURSE FOR MIDDLE AND HIGH SCHOOL STUDENTS. IT INTEGRATES AI
TECHNOLOGY SKILLS TRAINING WITH HUMAN-CENTERED DESIGN TO FOSTER
CRITICAL THINKING, PROBLEM-SOLVING, AND COMPUTATIONAL AGENCY. THROUGH
HANDS-ON LEARNING EXPERIENCES, CAREER NETWORKING, AND MENTORSHIP, MOUSE
PREPARES STUDENTS FOR THE RAPIDLY EVOLVING DIGITAL WORLD AND AIMS TO
ADVANCE THEIR SENSE OF COMMUNITY AND ECONOMIC MOBILITY.
STUDENTS ENTER THE PROGRAM WITH LITTLE OR NO CODING EDUCATION AND LEAVE
WITH CORE TECHNOLOGY AND COMPUTATIONAL THINKING SKILLS, ACCELERATED SEL
GROWTH, AND A PRACTICAL UNDERSTANDING OF HOW TO ACCESS MEANINGFUL
CAREERS IN TECH.
SINCE 2021, MOUSE AI DESIGN LEAGUE HAS BEEN SUCCESSFULLY COMPLETED BY
MORE THAN 12,000 STUDENTS AT SCHOOLS IN ALL FIVE BOROUGHS OF NEW YORK
CITY UPSTATE NEW YORK, PITTSBURGH, AND NEWARK, NJ.

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

Schedule O (Form 990) 2023 Page 2

Name of the organization MOUSE INC.

Employer identification number 13-3973196

DURING THE 2023-2024 SCHOOL YEAR, MOUSE'S GROUNDBREAKING AI EDUCATION

PROFESSIONAL DEVELOPMENT PROGRAM TRAINED EDUCATORS TO TEACH THE

FUNDAMENTALS OF AI ENGINEERING, GENERATIVE AI, AND MACHINE LEARNING.

THIS CURRICULUM WAS DEVELOPED BY MOUSE IN CONJUNCTION WITH CARNEGIE

MELLON UNIVERSITY AND INCLUDES A FOUR-MODULE AI ENGINEERING UNIT

ADAPTABLE FOR MIDDLE AND HIGH SCHOOL STUDENTS.

THE AI DESIGN LEAGUE PROGRAM CONCLUDES WITH STUDENTS COMPETING IN THE

NYC, DIGITAL MEDIA AND TECHNOLOGY CHALLENGE AND CAREER DAY (KNOWN TO

STUDENTS AS EMOTI-CON). THE THE 16TH ANNUAL EMOTI-CON WAS HELD ON MAY

30, 2024, AT AMAZON'S HEADQUARTERS ON FIFTH AVENUE IN MANHATTAN.

STUDENTS FROM ALL FIVE BOROUGHS MET WITH 88 TECH INDUSTRY PROFESSIONALS

TO EXPLORE TECH CAREER OPPORTUNITIES AND RECEIVE FEEDBACK ON THE AI

DESIGN LEAGUE STUDENT PROJECTS. STUDENTS EXPLORED A WIDE VARIETY OF

INDUSTRIES AND TECHNOLOGIES, DEVELOPING PERSONAL CONNECTIONS TO GUIDE

THEIR ACADEMIC AND PROFESSIONAL JOURNEYS. WINNING STUDENT PROJECT TEAMS

RECEIVED AWARDS.

MOUSE CREATE

MOUSE CREATE (CREATE.MOUSE.ORG) IS OUR UNIQUE LEARNING MANAGEMENT

SYSTEM, WITH OVER 200 TECH COURSES AND PROJECTS. MOUSE'S NEW "DESIGN

WITH PURPOSE" COURSE CONSISTS OF OVER 25 HOURS OF ADAPTABLE

ISTE-ALIGNED CURRICULAR CONTENT, INCLUDING AI ENGINEERING,

HUMAN-CENTERED DESIGN, UX/UI SKILLS, AND HANDS-ON DESIGN SOFTWARE

TRAINING. EACH ACTIVITY HAS LESSON PLANS FOR TEACHERS, STEP-BY-STEP

STUDENT-FACING TEACHING MATERIALS, AND WORK SUBMISSION STEPS FOR

STUDENTS.

Schedule O (Form 990) 2023 Page 2

Name of the organization MOUSE INC. Employer identification number 13-3973196

PROFESSIONAL DEVELOPMENT

IN FY24, MOUSE TRAINED 2,310 TEACHERS IN COMPUTER SCIENCE, AI

ENGINEERING, DIGITAL MEDIA LITERACY, AND CITIZENSHIP. THESE TRAININGS

CONSISTED OF 97 PROFESSIONAL DEVELOPMENT EVENTS (385 HOURS OF

TRAINING).

MOUSE CONTINUED TO IMPLEMENT A MULTI-YEAR NEW YORK STATE COMPUTER

SCIENCE AND DIGITAL FLUENCY STANDARDS GRANT IN 18 SCHOOL DISTRICTS IN

PARTNERSHIP WITH ROCKLAND COUNTY BOCES, WESTERN SUFFOLK COUNTY BOCES,

AND THE LONGWOOD AND WILLIAM FLOYD SCHOOL DISTRICTS.

THIS WORK WAS PERFORMED UNDER A FIVE-YEAR SMART START GRANT MOUSE

RECEIVED IN 2020. IT INCLUDES MOUSE TRAINING FOR TEACHERS IN ALIGNMENT

WITH THE LATEST NEW YORK STATE COMPUTER SCIENCE AND DIGITAL FLUENCY

STANDARDS. THESE TRAININGS ELEVATE CLASSROOM LEARNING WITH ARTIFICIAL

INTELLIGENCE AND MACHINE LEARNING GUIDES, DIGITAL ACCESSIBILITY

PROGRAMS, DIGITAL CITIZENSHIP SEMINARS, AND MEDIA LITERACY WORKSHOPS

DELIVERED TO STUDENTS BY TEACHERS ACROSS A WIDE RANGE OF STEM AND

NON-STEM SUBJECT SPECIALTIES.

IN FY24, NATIONAL COMPUTER SCIENCE EDUCATION LEADER CODE.ORG RENEWED

MOUSE'S REGIONAL PARTNERSHIP STATUS THROUGHOUT NEW YORK STATE. THIS

ENABLES MOUSE TO CONTINUE LEADING INNOVATIVE STEM PROFESSIONAL

DEVELOPMENT EVENTS FOR K-12 TEACHERS AND SUPPORTING THE CODE.ORG

CURRICULA FOR STUDENTS: CS FUNDAMENTALS FOR GRADES K-5, CS DISCOVERIES

FOR GRADES 6-10, CS PRINCIPLES FOR GRADES 9-12, AND AP CS A FOR GRADES

10-12.

Schedule O (Form 990) 2023 Page **2**

Name of the organization

MOUSE INC.

Employer identification number 13-3973196

FOR NEW YORK CITY PUBLIC SCHOOLS, IN ADDITION TO MOUSE'S AI DESIGN

LEAGUE, MOUSE'S COLLABORATION WITH CS4ALL INCLUDED AN EXTENSIVE

TRAINING PROGRAM WITH K-2 TEACHERS, ENABLING THEM TO USE SCRATCH JR.

INTRODUCTORY COMPUTER SCIENCE PROGRAMS WITH YOUNG STUDENTS.

FOR UNIVERSITY GRADUATE STUDENTS RECEIVING MASTER IN EDUCATION DEGREES

IN NEW YORK CITY, MOUSE PARTNERED WITH CUNY'S LEHMAN COLLEGE TO TRAIN

FUTURE TEACHERS TO PROVIDE ADVANCED TECHNOLOGY EDUCATION TO K-12

STUDENTS

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

FORM 990 IS PREPARED BY AN INDEPENDENT AUDITOR AND IS REVIEWED BY THE CEO,
CHIEF OF STAFF AND OUTSOURCED CONTROLLER.

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

MOUSE REGULARLY DISTRIBUTES THE POLICY EVERY YEAR AND REQUIRES BOARD MEMBERS TO REVIEW AND SIGN.

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

EACH YEAR, THE COMPENSATION COMMITTEE OF THE MOUSE BOARD OF DIRECTORS

REVIEWS COMPARABLE SALARIES BASED ON A RECOGNIZED STUDY AND REVIEWS THE

PERFORMANCE OF THE EXECUTIVE DIRECTOR. BASED ON BOTH THE PERFORMANCE OF THE

EXECUTIVE DIRECTOR AND PREVAILING MARKET DATA, A NEW PROPOSED SALARY AND

BENEFIT PACKAGE IS VOTED ON BY THE COMMITTEE. THE MINUTES OF THE

COMPENSATION COMMITTEE REFLECT THE NATURE OF THIS PROCESS.

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

Schedule O (Form	990) 2023								Page 2
Name of the organ		INC.					Employer ider	ntification i 73196	
FINANCIAL	STATEMENTS	ARE O	N WEBSITE.	GOVERNING	DOCUMENTS	ΑV	/AILABLE	UPON	
REQUEST.									

Form **8868**

(Rev. January 2024)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or **Print** MOUSE INC. 13-3973196 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 25 BROADWAY C/O TFA 12TH FL instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10004 Enter the Return Code for the return that this application is for (file a separate application for each return) 01 **Application Is For** Application Is For Return Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) Form 8870 05 12 Form 990-T (trust other than above) Form 5330 (individual) 13 Form 5330 (other than individual) Form 990-T (corporation) 07 14 Form 1041-A After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of LARRY LIEBERMAN 25 BROADWAY C/O TFA 12TH FL - NEW YORK, NY 10004 Telephone No. (646)574-6446 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until MAY 15 , 20 25 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 _____ or JUN 30 . , 2024 X tax year beginning _____ JUL 1 , 20 $\, 23 \,$, and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return 2 Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2024)



Title FY24 990 to be signed

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