Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

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

Α	For the	e 2024 ca	lendar year, or tax ye	ar beginning			, and e	nding		_			
В	Check if a	applicable:	C Name of organization	OBJECTIVE-S	SEE FOUNDAT	ION INC		D	Employ	er identific	cation number	,	
	Address	change	Doing business as										
一		-	Number and street (or	P.O. box if mail is not	delivered to stree	t address)	Room/suite	86	-35468	76			
Ш	Name ch	Name change 38 LEIHULU WAY						Е	E Telephone number				
	Initial retu	ırn	City or town		St	ate	ZIP code	(0)	00) 702	7446			
Ħ			Kula		Н	l	96790	(0)	08) 783	-7410			
Ш	Final return	/terminated	Foreign country name	Foreign	province/state/cou	unty	Foreign postal	code					
П	Amended	d return						G	Gross re	eceipts \$		692,185	
П	A I: 4: -		F Name and address of	principal officer:				11/-> - 45/				Yes X No	
Ш	Application	on pending			00700			H(a) Is this a				1 =	
			Patrick Wardle 38 L	einulu vvay, Kula	, HI 96790			H(b) Are all				Yes No	
1	Tax-exer	mpt status:	X 501(c)(3) 50)1(c) ()	(insert no.)	4947(a)(1) or 527	If "No,	" attach a	list. See in	structions		
J	Website	· ww	w.objective-see.org					H(c) Group	exemptio	n number			
<u> </u>					-ti		1. 1/-						
		organization		Trust Associa	ation Other		L Yea	ar of formation	202	1 101 51	tate of legal do	micile: HI	
	art I	_	mmary										
	1	Briefly d	escribe the organiza	tion's mission or	most significa	nt activitie	es:						
Ф		Objectiv	e-We is a program d	edicated to									
2		making the macOS security space more inclusive and accessible to everyone. Our mission is											
r.		to suppo	ort and encourage in	dividuals from und	derrepresente	d commu	nities to purs	ue careers	s in				
Š	2	Check tl	his box if the	organization disc	continued its o	perations	or disposed	of more th	nan 25%	of its ne	et assets.		
ဖိ	3		of voting members of							3		2	
త	4		of independent votir							4		0	
ies	5		mber of individuals e							5		0	
Activities & Governance	6		mber of volunteers (6			
ç	7a		related business rev							7a		14,548	
•	b		elated business taxal							7b		14,040	
		14Ct unit	ciated business taxai	ne moonie monii i	01111 000-1,1	art i, inic		1	ior Year	175	Curren	ıt Year	
_	8	Contribu	utions and grants (Pa	rt VIII line 1h)						16,907	Guilon	614,547	
Revenue	9		n service revenue (Pa							68,440		63,090	
Š	10		ent income (Part VIII			 \				7,835		14,548	
Re	11		evenue (Part VIII, col							0		14,540	
	12		enue—add lines 8 thr						5	93,182		692,185	
	13		and similar amounts							05,001		032,103	
	14		paid to or for memb							5,065		0	
	45		other compensation,						2	37,000		372,307	
es	16a		onal fundraising fees							0 000		012,301	
ens	10a		ndraising expenses (0			U			
Expenses	17		roraising expenses (rpenses (Part IX, col			10)	0		1:	26,859		160,345	
Ш								-					
	18		penses. Add lines 13							73,925		532,652	
(19	Revenu	e less expenses. Sul	macrine to non	Tille IZ			Danimaina		19,257	Ford of	159,533	
Net Assets or	20	Total	sets (Part X, line 16)					Beginning			End of		
SSe	20 21		bilities (Part X, line 16)						- !'	65,281 0		324,814	
et /	22		ets or fund balances.						1	65,281		324,814	
				Subtract line 21	iioiii iiile 20 .	<u> </u>			'	05,201		324,014	
	art II		Inature Block y, I declare that I have exa	mined this return inclu	iding accompanyi	ag achadulas	and statements	and to the h	oot of my	knowlodgo			
			ect, and complete. Declarat			•				-			
			,							•	4/29/2025		
Si	gn	Cian	ature of officer						Date		4/23/2023		
He	re	_					DDE	CIDENT	Date				
			rick Wardle				PRE	SIDENT					
			or print name and title	П	Duamanania ain 1			D-4-	1		DTIN		
ь.	اء:	Prep	parer's name		Preparer's signat	ure		Date		Check	if PTIN		
Pa		HIR	A AKRAM		HIRA AKRAM	1		5/9/2	2025	self-emplo		60885	
	eparer	·		•							1		
Us	e Only	,		PERT SERVICES		00			m's EIN	99-06			
		•		3RD ST, BROOK					one no.		889-9982		
Ма	y the IF	RS discus	s this return with the	preparer shown	above? See ir	nstructions	s				. Ye	es X No	

Χ

(Code:) (Expenses \$	67,349 including grants of \$) (Revenue \$)
Ongoing research of	n emerging cyber sercurity	threats, such as malware, exploits and		
vulnerabilities.Resul	Its of the Foundation's rese	earch will are shared with the public via b	log	
posts, white papers	and conference talks.			

525,611

4d Other program services (Describe on Schedule O.)

Total program service expenses

4c

(Expenses \$ 363,093 including grants of \$

0)(Revenue \$

0)

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 <i>Schedule B, Schedule of Contributors</i> ? See instructions	2		Χ
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		Χ
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? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D. Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," complete Schedule D, Part VII	11b		Х
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		Х
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		Х
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		Χ
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	11f		Χ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Χ	
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If</i> "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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If</i> "Yes," complete Schedule G, Part I. See instructions.	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		
202		19 20a		X
20a b		20a 20b		^
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	-00		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Χ
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	23		~
2/12	employees? <i>If "Yes," complete Schedule J</i>	23		Х
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines</i>			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	250		^
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Χ
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
•	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV.	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	20.0		
	"Yes," complete Schedule L, Part IV	28c		Χ
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Χ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Χ
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes,"	32		~
33	complete Schedule N, Part II	32		Х
33	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,			Ì
	III, or IV, and Part V, line 1.	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		Х
3,	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
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		
	TEDOLADIE GALIING IGANIONICI WILLINGS IC DITZE WILLIELS!	1 10	•	

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ırns? .		2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		[3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedul	le O .	[3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	r autho	ority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	al acco	ount)?	4a		Χ
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 Acceptable 1997.	counts	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action?		5b		Χ
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	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 contribut	ions o	r			
_	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for		li i			
	and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it we required to file Form 8282?	vas		7c		
d		7d		70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		ct?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 885			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
	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		10a				
b		10b				
11	Section 501(c)(12) organizations. Enter:	1				
а		11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	446				
120	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	12	12a		
12a b		12b	11	ıza		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120				
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.			100		
b	Enter the amount of reserves the organization is required to maintain by the states in which					
		13b				
С		13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Χ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		1	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	eratior	n or			
	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 investmen	nt incor	me?	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	activiti	es			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?			17		
	If "Yes " complete Form 6069.					

Form 990 (2024) **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

Sect	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 1a 2			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Χ
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Χ
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
-	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	- 1.0		
	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		Х
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C)	, , ,
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Χ
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Χ	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
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		
13	Did the organization have a written whistleblower policy?	13		Х
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?			
а	The organization's CEO, Executive Director, or top management official.	15a		Χ
b	Other officers or key employees of the organization	15b		Χ
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Χ
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 5	501(c)		
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest polynomials and the second	icy,		
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	PATRICK WARDLE (808)783-7416			
	38 LEIHULU WAY, KULA, HI 96790		222	

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(7)

(9)

(10)

(11)

(13)

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Part VII **Employees, and Independent Contractors**

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.											
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	ot ch unles	s pe	ition more rson i	than of its both pr/truste Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations	
(1) PATRICK WARDLE	35.00										
PRESIDENT, DIRECTOR	35.00	Χ	•					200,000			
(2) ANDREA ROZENBERG	30.00										
SECRETARY-TREASURER	30.00	Х						75,000			
(3)											
(4)											
(5))										
(6)											

86-354 oyees (contin		P	age 8				
oyees (conuin	uea)						
(E) Reportable compensation from related ganizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations						
3							
0			0				
0			0				
00 of			1				
		Yes	No				
	3		X				
	4		Х				
	5		X				
00,000 of							
rganization's t							
	(C)					

Form 9	90 (2024)	OBJECTI\	/E-SEE FOUNDAT	ION INC								86-354	6876	Page 8	
Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont										ued)				
		(A) Name and title		(B) Average hours	box,	unles	Pos neck ss pe d a d	rson lirecto	than or is both a or/truste	an e)	(D) Reportable compensation	(E) Reportable compensation	rtable Estimated nsation of oth		
				per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	orga	mpensation from the inization and d organizations	
(15)												1			
(16)															
(17)															
(18)															
(19)															
(20)															
(21)						4									
(22)					*										
(23)															
(24)															
(25)				1											
						٠.					275,000	0	-	0	
c d			sheets to Part VII, S							-	275,000	0	-	0	
2	Total num	nber of individuals	s (including but not loom the organization	limited to those lis	sted a	abov	e) v	vho	receiv	ed.	more than \$100),000 of		1	
3			y former officer, di										3	Yes No X	
4	the organ		line 1a, is the sumed organizations gre	•	00? //	f "Ye	es,"	con	plete	Scl	hedule J for suc	h 	4	X	
5			ne 1a receive or acceeding a receive or access o	·			-			_			5	Х	
Sect		ependent Contr		,					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					1	
1			ır five highest comp ganization. Report c										tax ye	ar.	
			(A) Name and business ad	dress							(B) Description of ser	vices ((C Comper		
														0	
														0	
		_		_							_			0	
2	Total num	nber of independe	ent contractors (incl	udina but not limi	ted to	tho	se I	iste	d abov	/e)	who received			0	
_		•	mnensation from the	•			1	,	Δ.J.O.	-,					

Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any	line in	this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
S S	1a	Federated campaigns	a	0				
ant	b		b	0				
يَ وَ	С		lc	0				
fts, Ar	d		d	0				
<u>a</u>	е	_	le	0				
ns,	f	All other contributions, gifts, grants, and						
utio er §			If 614	1,547		4		
ig #	g	Noncash contributions included in						
Contributions, Gifts, Grants and Other Similar Amounts	Ŭ	lines 1a–1f	g \$	0				
	h	Total. Add lines 1a–1f		. [614,547			
			Business C	ode	·			
ce	2a	Donations/tickets For Conference	900099		53,049	53,049		
ē Ž	b	Books and other publications	511190		10,041	10,041		
ıram Ser Revenue	С				0			
am	d				0			
Program Service Revenue	е	·			0			
P	f	All other program service revenue			0			
	g	Total. Add lines 2a–2f			63,090			
	3	Investment income (including dividends, inter		1	11.510		44.540	
		other similar amounts)			14,548		14,548	
	4	Income from investment of tax-exempt bond	proceeds		0			
	5	Royalties	(ii) Person	nal	U			
	6a	Gross rents 6a	(ii) i Green		*			
	b	Less: rental expenses 6b						
	C	Rental income or (loss) 6c	0	0				
	d	Net rental income or (loss)		Ť	0			
	7a	Gross amount from (i) Securities	(ii) Other	r				
		sales of assets						
		other than inventory 7a	0	0				
ne	b	Less: cost or other basis						
Revenue		and sales expenses 7b	0	0				
Re/	С	Gain or (loss)	0	0				
er	d	Net gain or (loss)	<u> </u>		0			
Other	8a	Gross income from fundraising						
		events (not including \$ 0						
		of contributions reported on line 1c). See Part IV, line 18	Ba	0				
	b		Bb .	0				
	C	Net income or (loss) from fundraising events	-	Ŭ	0			
	9a	Gross income from gaming activities.	1					
)a	0				
	b)b	0				
	С	Net income or (loss) from gaming activities .			0			
	10a	Gross sales of inventory, less						
		returns and allowances 1	0a	0				
	b		0b	0				
	С	Net income or (loss) from sales of inventory .			0			
sn			Business C	ode				
eo ne	11a				0			
lan /en	b				0			-
scellaneo Revenue	C	All other revenue			0			
Miscellaneous Revenue	d	All other revenue			0			
	<u>е</u> 12	Total revenue. See instructions		•	692,185	63,090	14,548	0
		i otali i o foliuo. Occ ilioti uotiUlio			002,100	00,090	17,040	U

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns. All other organizations must complete column (A).
--	--	---

	Check if Schedule O contains a response or note t	o any line in this Pa	art IX		📙
	not include amounts reported on lines 6b, 7b, 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	0			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	0		0	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	372,307	372,307		
8	Pension plan accruals and contributions (include	,			
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (nonemployees):	+ .			
а	Management	0			
b	Legal	508	508		
C	Accounting	974	974		
d	Lobbying	0	<u> </u>		
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A), amount, list line 11g expenses on Schedule O.)	0		0	
12	Advertising and promotion	0			
13	Office expenses	14,567	14,567		
14	Information technology	0	,		
15	Royalties	0			
16	Occupancy	0			
17	Travel	26,726	26,726		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	103,233	103,233		
20	Interest	0	100,200		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0		, i	
24	Other expenses. Itemize expenses not covered	Ü			
	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	Vehicle expenses	14,337	14,337		
b		,	,001		
c					
d		0			
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	532,652	532,652	0	0
26	Joint costs. Complete this line only if the	332,302	332,302	- i	
_•	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)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X .			
			(A)		(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing	165,281	1	324,814
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0	5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	
Assets	7	Notes and loans receivable, net	0	7	0
SS	8	Inventories for sale or use	0	8	
⋖	9	Prepaid expenses and deferred charges	0	9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 0			
	b	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 33)	165,281	16	324,814
	17	Accounts payable and accrued expenses	0	17	·
	18	Grants payable	18		
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
ig		controlled entity or family member of any of these persons	0	22	
Ë	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third	•		
		parties, and other liabilities not included on lines 17–24). Complete			
		Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	0		0
<u> </u>		Organizations that follow FASB ASC 958, check here X	,		
Se		and complete lines 27, 28, 32, and 33.			
<u>a</u> n	27	Net assets without donor restrictions	165,281	27	324,814
Ва	28	Net assets with donor restrictions	103,281	28	324,014
pu	20	Organizations that do not follow FASB ASC 958, check here	U	20	
Ē					
ō	20	and complete lines 29 through 33. Capital stock or trust principal, or current funds		20	^
ţ	29	Paid-in or capital surplus, or land, building, or equipment fund	0	29	0
Net Assets or Fund Balances	30		0	30	224.944
Ä	31	Retained earnings, endowment, accumulated income, or other funds		31	324,814
Net	32	Total net assets or fund balances	165,281	32	324,814
_	33	Total liabilities and net assets/fund balances	165,281	33	324,814

Part	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)		692,185
2	Total expenses (must equal Part IX, column (A), line 25)		532,652
3	Revenue less expenses. Subtract line 2 from line 1		159,533
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		165,281
5	Net unrealized gains (losses) on investments		
6	Donated services and use of facilities		
7	Investment expenses		
8	Prior period adjustments		
9	Other changes in net assets or fund balances (explain on Schedule O)		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		
	column (B)))	324,814
Part	· ·		
	Check if Schedule O contains a response or note to any line in this Part XII		<u>. </u>
		_	Yes No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on		
_	Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. <u>2a</u>	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	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		
	separate basis, consolidated basis, or both.		
	Separate basis Consolidated basis Both consolidated and separate basis		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	. 2c	
	If the organization changed either its oversight process or selection process during the tax year, explain on		
	Schedule 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?	<u>3a</u>	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		000
		Form	n 990 (2024)
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Attach to Form 990 or Form 990-EZ.

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

Inspection Employer identification number

OBJ	EC1	TIVE-SEE FOUNDATION INC					86-35	46876	
Par	t I	Reason for Public Char	ity Status. (All or	ganizations must co	mplete t	his part.)	See instructions.		
The	orga	anization is not a private foundat	,	•	-		,		
1		A church, convention of church	es, or association o	f churches described in	n section	170(b)(1)	(A)(i).		
2		A school described in section 1	1 70(b)(1)(A)(ii) . (Atta	ach Schedule E (Form	990).)		•		
3		A hospital or a cooperative hos	pital service organiz	zation described in sec	tion 170(l	b)(1)(A)(ii	i).		
4		A medical research organizatio	n operated in conjui	nction with a hospital d	lescribed	in section	170(b)(1)(A)(iii), Er	iter the	
		hospital's name, city, and state	•						
5		An organization operated for th section 170(b)(1)(A)(iv). (Com		e or university owned	or operate	ed by a go	vernmental unit desc	cribed in	
6		A federal, state, or local govern	ment or governmen	ntal unit described in se	ection 170)(b)(1)(A)(v).		
7		An organization that normally redescribed in section 170(b)(1)(m a gove	rnmental ι	unit or from the gene	ral public	;
8		A community trust described in		·	II.)				
9		An agricultural research organi				d in coniu	nction with a land-gr	ant colle	ae
		or university or a non-land-gran university:							90
10	Χ		eceives (1) more tha	an 33 1/3% of its suppo	ort from co	ontribution	s, membership fees	and gro	ss
		receipts from activities related t							
		support from gross investment acquired by the organization af						sses	
11		An organization organized and							
	H		•		•		. , ,		
12		An organization organized and one or more publicly supported							
		Check the box on lines 12a thro							
а		Type I. A supporting organiz	ation operated, sup	ervised, or controlled b	oy its supp	orted orga	anization(s), typically	/ by givin	g
	į	the supported organization(sorganization. You must con	s) the power to regu	larly appoint or elect a					
b		Type II. A supporting organization.	•		on with its	cupporte	d organization(s) by	having	
D		control or management of th							d
		organization(s). You must c			•		3		
С		Type III functionally integra						rated wit	h,
		its supported organization(s)		•	-			!4!	(-)
d		Type III non-functionally in that is not functionally integr							
		requirement (see instruction							
е		Check this box if the organiz					Type I, Type II, Typ	e III	
_		functionally integrated, or Ty		Illy integrated supportir	ng organiz	ation.			
t ~		Enter the number of supported							0
g	(i)	Provide the following information Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the c	organization	(v) Amount of monetary	(vi) A	mount of
	``		, , ,	(described on lines 1–10	listed in you	ur governing	support (see	other s	upport (see
				above (see instructions))	docui	ment?	instructions)	instr	uctions)
					Yes	No			
(A)									
. ,		Ť							
(B)									
(C)									
/D)									
(D)									
(E)									
(-)									
Tota	ı						0		0

Pa	rt II Support Schedule for Orga						Y
	(Complete only if you check						der
	Part III. If the organization fa	ails to quality un	der the tests lis	sted below, plea	ase complete F	art III.)	
_	ction A. Public Support	1					
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						0
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
4	Total. Add lines 1 through 3	0	0	0	0	0	0
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						0
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7	Amounts from line 4	0	. 0	0	0	0	0
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from		</th <th></th> <th></th> <th></th> <th></th>				
	similar sources						0
9	Net income from unrelated business						
	activities, whether or not the business is						
	regularly carried on	•					0
10	Other income. Do not include gain or	-					
	loss from the sale of capital assets						
	(Explain in Part VI.)						0
11	Total support. Add lines 7 through 10						0
12	Gross receipts from related activities, etc. (s	see instructions)				12	
	First 5 years. If the Form 990 is for the orga		and third fourth (or fifth tay year as a			
	organization, check this box and stop here						
800	ction C. Computation of Public Su						
14	Public support percentage for 2024 (line 6, o			(f \)		14	0.00%
			-			15	0.00%
15	Public support percentage from 2023 Sched						0.00 /0
16a	33 1/3% support test—2024. If the organizand stop here. The organization qualifies a						<u> </u>
			•				
b	33 1/3% support test—2023. If the organiz						Τ
	box and stop here . The organization qualification	es as a publicly sup	ported organization	n			
17a	10%-facts-and-circumstances test—2024	•					
	10% or more, and if the organization meets						
	Part VI how the organization meets the facts		-	ation qualifies as a	a publicly supported	1	Η
	organization						· · · · <u> </u>
b	10%-facts-and-circumstances test—2023	•					
	15 is 10% or more, and if the organization m in Part VI how the organization meets the fa			·			
	organization	ioto-anu-oncumblan	oco icoi. The organ	mzauon quaimes a	s a publicly suppor	iou	T

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.")			374,350	516,907	614,547	1,505,804
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose			34,171	68,440	63,090	165,701
3	Gross receipts from activities that are not an						•
	unrelated trade or business under section 513						0
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities					<u> </u>	0
3	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	408,521	585,347	677,637	1,671,505
	Amounts included on lines 1, 2, and 3				, -	,,,,,,	, , , , , , , , , , , , , , , , , , , ,
	received from disqualified persons						0
b	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						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from						
	line 6.)						1,671,505
	etion B. Total Support	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
Gale 9	ndar year (or fiscal year beginning in) Amounts from line 6	(a) 2020 0	(b) 2021 0	408,521	585,347	677,637	1,671,505
	Gross income from interest, dividends,	0	0	400,321	363,347	077,037	1,07 1,303
IVa	payments received on securities loans, rents,	•					
	royalties, and income from similar sources				7,835	14,548	22,383
b	Unrelated business taxable income (less				,	,	,
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	0	0	0	7,835	14,548	22,383
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on .						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						_
40	(Explain in Part VI.)						0
13	Total support. (Add lines 9, 10c, 11, and 12.)	0	_	400 E04	E02 400	602.405	1,693,888
14	First 5 years. If the Form 990 is for the orga		O cond third fourth (408,521	593,182	692,185	1,093,000
'-	organization, check this box and stop here			•			X
Sec	ction C. Computation of Public Su						
15	Public support percentage for 2024 (line 8, o			(f))		15	0.00%
16	Public support percentage from 2023 Sched		-			16	0.00%
	ction D. Computation of Investmen						
17	Investment income percentage for 2024 (line			column (f))		17	0.00%
18	Investment income percentage from 2023 S					18	0.00%
19a	33 1/3% support tests—2024. If the organ					and line 17 is	
	not more than 33 1/3%, check this box and	-			-		
b	33 1/3% support tests—2023. If the organ						Γ
_	line 18 is not more than 33 1/3%, check this	_	-				
20	Private foundation. If the organization did	not check a box on	line 14, 19a, or 19	b, check this box a	and see instructions	8	

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

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

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

Part	Supporting Organizations (continued)			1
			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	4.4		
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c	I	
Secti	ion B. Type I Supporting Organizations	1110		
0000	on b. Type I supporting organizations		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			110
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers.			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			T
4	Mana a majariku af kha annanjarki anla dinaskana ankurakana dunin nikha kayu yang Balandunin af kha dinaskana		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations	<u> </u>		
	on 217 m Type in capper mig ci gamizatione		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	-		
Socti	supported organizations played in this regard. on E. Type III Functionally Integrated Supporting Organizations	3		<u> </u>
		uotion	a)	
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction of the Activities Test. Complete line 2 below.	icuon	S).	
_	The organization is the parent of each of its supported organizations. Complete line 3 below.			
b		4:a.a.a.\		
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruct	ions).	1	T
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's	_a		
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Ves." describe in Part VI the role played by the organization in this regard	3h	1	i

rype III Non-Functionally Integrated 509(a)(3) Supporting O			
1 Check here if the organization satisfied the Integral Part Test as a qualifying	•		•
instructions. All other Type III non-functionally integrated supporting organ	izati	ons must complete Sections	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
		(7.1) 1.100.	(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	0	0
5 Depreciation and depletion	5	<u> </u>	
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	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
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	1à		
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	0	0
e Discount claimed for blockage or other factors		, and the second	
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	0
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,	╁	, , ,	
see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 0.035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount	<u> </u>	Ü	Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		0
2 Enter 0.85 of line 1.	2		0
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	Ť		
emergency temporary reduction (see instructions).	6		0
7 Check here if the current year is the organization's first as a non-functionally	v inte	egrated Type III supporting	
instructions)	,	Janacou i ypo in ouppoining (21 garnzadori (500

Schedule A (Form 990) 2024

Part	Type III Non-Functionally integrated 509(a)(3) Supporting Organi	zations (continuea)	<u> </u>
Section	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt	pt purposes of supported	1	
	organizations, in excess of income from activity		2	
	Administrative expenses paid to accomplish exempt purpos	es of supported organiza	ations 3	
	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required—	provide details in Part V i	5	
6	Other distributions (describe in Part VI). See instructions.		.6	
7	Total annual distributions. Add lines 1 through 6.		7	0
8	Distributions to attentive supported organizations to which the	he organization is respor		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2024 from Section C, line 6		9	0
10	Line 8 amount divided by line 9 amount	1	10	
\$	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6			0
2	Underdistributions, if any, for years prior to 2024			
	(reasonable cause required—explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2024			
<u>a</u>	From 2019			
b	From 2020			
<u> </u>	From 2021			
d	From 2022			
	From 2023			
	Total of lines 3a through 3e	0		
g	Applied to underdistributions of prior years		0	
	Applied to 2024 distributable amount			0
<u>i</u> :	Carryover from 2019 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	0		
4	Distributions for 2024 from	U		
7	Section D, line 7: \$ 0			
а	Applied to underdistributions of prior years		0	
	Applied to 2024 distributable amount			0
	Remainder. Subtract lines 4a and 4b from line 4.	0		,
5	Remaining underdistributions for years prior to 2024, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI . See instructions.		O	
6	Remaining underdistributions for 2024. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain			
	in Part VI. See instructions.			0
7	Excess distributions carryover to 2025. Add lines 3j			
	and 4c.	0		
8	Breakdown of line 7:			
а	Excess from 2020 0			
b	Excess from 2021 0			
С	Excess from 2022 0			
d	Excess from 2023 0			
۵	Excess from 2024			

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

SCHEDULE F (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

Open to Public

OMB No. 1545-0047

Name of the organization

OBJECTIVE-SEE FOUNDATION INC

Inspection
Employer identification number

86-3546876

Par	General Inform Form 990, Part IV		vities Outsid	e the United States. Com	plete if the organization answe	ered "Yes" on
1		antees' eligibility	for the grants o	ds to substantiate the amount rassistance, and the selection	_	Yes No
2	For grantmakers. Desc outside the United State		e organization's	procedures for monitoring the	use of its grants and other as	ssistance
3	Activities per Region. (T	he following Par	t I, line 3 table c	an be duplicated if additional	space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(4)	Europe (Including Iceland and Greenland)			Speaking at Seminars or Co	Objective By The Sea, Object	54.000
(1)	icciana ana Orcemana)	0	1			51,892
(2)						
(3)						
(4)						
(5)						
(6)			*	0		
(7)			5			
(8)						
(9)						
(10)		×				
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
	Subtotal	0	1			51,892
b	Total from continuation					
_	sheets to Part I	0	0			0 51,892
C	Totals (add lines 3a and 3b)	1 0	1			51,892

		sistance to Organi						on Form 990,
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	y recipient who rece (c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)							1	
(2)								
(3)								
(4)								
(5)					A			
(6)				•	(P)			
(7)								
(8)								
(9)			*					
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
2 Enter total r	·	organizations listed abo by the IRS, or for which	_	-				
-		inizations or entities .	-			=		0

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed Part III

line 16. Part III can b	oe duplicated if additional sp	pace is needed					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
_(1)							
(2)							
_(3)							
_ (4)							
(5)							
_(6)			•				
_(7)							
_(8)							
_ (9)		* C					
<u>(10)</u>)				
(11)							
(12)	7-(/						
(13)	C'r						
(14)	10,0						
(15)							
(16)							
(17)							
(18)							
(10)		<u> </u>			I		

86-3546876

D = =4 11/	F!	-
Part IV	Foreian	Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations. (see the Instructions for Form 5471)
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see the Instructions for Form 8621)
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships. (see the Instructions for Form 8865)
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) (Rev. 12-2024)

Part v	Supplemental Information
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method;
	amounts of investments up appendix program of the 2 (months), that it is no of column (i) (accounting method).
	amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method);
	and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any
	additional information. See instructions.
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SCHEDULE 0

(Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service Name of the organization

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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	Employer identification number
OBJECTIVE-SEE FOUNDATION INC	86-3546876
Form 990, Part III, Line 4d: Program Service Expenses: 103,234, Grants and allocations: 0,	
Revenue: 0 Program Service Conferences and Training on cyber security. Conference Objective	
By The Sea v 6.0. Dedicated to education on macOS and iOS cybersecurity	
Form 990, Part III, Line 4d: Program Service Expenses: 259,859, Grants and allocations: 0,	<u> </u>
Revenue: 0 Program Service Objective-We, dedicated to donate and collaborate to make the	
macOS and iOS security field more inclusive and diverse.	
Form 990, Part III, Line 2: Objective-We, dedicated to donate and collaborate to make the	
macOS and iOS security field more inclusive and diverse.	
Form 990, Part VI, Section B, Line 11B: The board of directors review the form 990.	
Form 990, Part VI, Section C, Line 19: Governing documents, policies, and financial statements	
are available to the public upon request.	
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