

**STATE OF COLORADO
SECRETARY OF STATE**



**Annual Financial Statement
For Colorado Charitable Organizations**

Renewal

This is estimated financial information for a charitable organization: No

Registration Number: 20233011669

Renewal Id: TEMP298411
PENDING

This financial report covers the fiscal year beginning: 01/01/2023 and
ending: 12/31/2023

Organization Information

1. Organization's name: OBESITY AWARENESS IN ACTION

2. Federal Employer Identification Number (FEIN): 86-3427874

3. Organization's principal address:

Street address: _____

City: JOHNSTOWN State: CO Zip: 80534 Country: United States

Fiscal year ends: 12/31

If incorporated, date incorporated: 07/16/2021. State of incorporation: CO

If not incorporated:

Type of organization: _____

Date established: _____ State established: _____

4. Telephone number: 9706692146 Fax number: _____

Email: OAA MOVEMENT@OUTLOOK.COM

Web site: WWW.OAA MOVEMENT.ORG

5. Has the organization applied for or been granted IRS tax exempt status? Yes

If 'Yes', date of determination letter, or of application if determination is pending: 07/16/2021

If tax-exempt, IRS code: 501(C)(3)

Are contributions to the organization tax deductible? Yes

6. NTEE codes that describe your organization:

EDUCATION

FOOD, AGRICULTURE, & NUTRITION

YOUTH DEVELOPMENT

Financial Summary as of most recent fiscal year end (line numbers are from Form 990)

7. Revenue (Amounts Received During the Year):

Contributions: \$0.00

Government Grants: \$0.00

Program Service Revenue: \$0.00

Investments: \$0.00

Special Events and Activities: \$0.00

Sales: \$0.00

Other: \$0.00

Total Revenue (sum of all revenue items above): \$0.00

8. Expenses (Amounts Paid Out During the Year):

Program Services: \$0.00

Administration - Management and general: \$0.00

Fundraising: \$0.00

Total Expenses (sum of expense items listed above): \$0.00

9. Summary of Balance Sheet as of Fiscal Year End:

Total Assets, End of Year: \$0.00

Total Liabilities, End of Year: \$0.00

Net Assets, End of Year (Total Assets - Total Liabilities): \$0.00

Professional Fundraisers

10. Paid Solicitor / Professional Fund Raising Consultant Organization or Individual

1. PFC Name: SWEETHEART CITY RACING

Title: _____

NOTE: The above is a Professional Fundraising Consultant

Street address: P.O. BOX 374

City: LOVELAND State: CO Zip: 80539 Country: United States

Telephone number: 970-215-9925

Location and phone used to perform work on behalf of charitable organization if different from address above:**Street address:** 5200 N GARFIELD AVE**City:** LIVELAND **State:** CO **Zip:** 80538 **Country:** United States**Telephone number:** 970-215-9925**Other Information****11. Fundraising Professionals:****Outside Professional Fundraiser fees:** \$0.00**12. Is your organization related (other than by association with a statewide or nationwide organization) through membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?:** No

If 'Yes', the name of the related organization(s): _____

Is this related organization an exempt organization?: No**13. Did your organization solicit any contributions or gifts that were not tax deductible?:** NoIf "Yes" did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?: N/A**14. List the states with which you are registered to conduct solicitations from, or from which you have been granted an exemption:**

15. Name of authorized officer who signed this annual financial report:**Name:** N/A**Date:** N/A