

Return of Organization Exempt From Income Tax

2022

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.

Open to Public Inspection

Department of the Treasury
 Internal Revenue Service

A For the 2022 calendar year, or tax year beginning 07-01, 2022, and ending 06-30, 2023

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization Vocational Visions
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
 26041 Pala
 City or town, state or province, country, and ZIP or foreign postal code
 Mission Viejo, CA 92691

D Employer identification number
 95-2972669

E Telephone number
 (949) 837-7280

G Gross receipts
 \$ 8,303,442

F Name and address of principal officer: DR. LINDA ALBERS
 Same as C above

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: www.vocationalvisions.org

K Form of organization: Corporation Trust Association Other

L Year of formation: 1975

M State of legal domicile: CA

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROVIDES VOCATIONAL, LIFE SKILLS TRAINING, AND SUPPORT SERVICES FOR ADULTS WITH DEVELOPMENT AND OTHER DISABILITIES.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	221
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	267,217	363,805
	9 Program service revenue (Part VIII, line 2g)	8,054,926	7,763,382
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,203	81,073
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		41,017
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,323,346	8,249,277
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,583,043	6,103,288
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25)	106,859	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,957,273	1,763,898
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	7,540,316	7,867,186	
19 Revenue less expenses. Subtract line 18 from line 12	783,030	382,091	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 8,528,961	End of Year 8,731,630
	21 Total liabilities (Part X, line 26)	3,987,191	3,807,769
	22 Net assets or fund balances. Subtract line 21 from line 20	4,541,770	4,923,861

Part II 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 true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer: TIM CHERVENAK Date: 10/3/23
 Type or print name and title: TIM CHERVENAK, EXECUTIVE DIRECTOR

Paid Preparer Use Only
 Print/Type preparer's name: RON LOPEZ Preparer's signature: RON LOPEZ Ron Lopez Date: 10-03-2023 Check if self-employed PTIN: P00758088
 Firm's name: GRUBER AND LOPEZ, INC. Firm's EIN:
 Firm's address: 438 OLD NEWPORT BLVD Phone no.: 949-346-2900
Newport Beach CA 92663

May the IRS discuss this return with the preparer shown above? See instructions Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)