

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

2024

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

A For the 2024 calendar year, or tax year beginning

, and ending

B Check if applicable:	C Name of organization WISH UPON A WEDDING	D Employer identification number 27-1370138
<input type="checkbox"/> Address change	Doing business as	E Telephone number 740-590-7307
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) 445 E. INNIS AVENUE, PO BOX 77552	Room/suite
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code COLUMBUS OH 43207	G Gross receipts\$ 951,914
<input type="checkbox"/> Final return/terminated		
<input type="checkbox"/> Amended return		
<input type="checkbox"/> Application pending		
F Name and address of principal officer: LACEY WICKSALL 445 E INNIS AVENUE COLUMBUS OH 43207		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
J Website: WWW.WISHUPONAWEDDING.ORG		H(c) Group exemption number
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 2009 M State of legal domicile: CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WEDDINGS AND VOW RENEWALS FOR COUPLES FACING SERIOUS ILLNESS OF LIFE-ALTERING CIRCUMSTANCES.
Revenue	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
Expenses	3 Number of voting members of the governing body (Part VI, line 1a) 3 9
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 9
	5 Total number of individuals employed in calendar year 2024 (Part V, line 2a) 5 5
	6 Total number of volunteers (estimate if necessary) 6 800
	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
	Prior Year 231,340 Current Year 750,383
Net Assets or Fund Balances	8 Contributions and grants (Part VIII, line 1h) 8 0
	9 Program service revenue (Part VIII, line 2g) 9 0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 0
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0
	Prior Year 114,868 Current Year 105,644
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 13 204,098
	14 Benefits paid to or for members (Part IX, column (A), line 4) 14 0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 15 137,337
	16a Professional fundraising fees (Part IX, column (A), line 11e) 16a 0
	b Total fundraising expenses (Part IX, column (D), line 25) 16b 80,100
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 17 275,780
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 18 617,215
	19 Revenue less expenses. Subtract line 18 from line 12 19 -271,007
	Beginning of Current Year 700,920 End of Year 293,089
	20 Total assets (Part X, line 16) 20 98,697
	21 Total liabilities (Part X, line 26) 21 35,955
	22 Net assets or fund balances. Subtract line 21 from line 20 22 602,223
	Beginning of Current Year 602,223 End of Year 257,134

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 <i>Lacey Wicksall</i>	Date 11.6.25			
	Type or print name and title LACEY WICKSALL	EXECUTIVE DIRECTOR			
Paid Preparer Use Only	Preparer's name STEPHEN A. GREEN	Preparer's signature <i>Stephen A. Green</i>	Date 11/5/25	Check <input type="checkbox"/> if self-employed	PTIN P01075955
	Firm's name WINKEL GREEN & COMPANY LLP		Firm's EIN 31-4442423		
	Firm's address 3752 N HIGH ST COLUMBUS, OH 43214		Phone no. 614-261-1494		

May the IRS discuss this return with the preparer shown above? See instructions

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

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