

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

TAXPAYER

OMB No. 1545-0047

COPY
ATS 2021Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

A For the 2021 calendar year, or tax year beginning

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization, and ending

REUNITE THE FIGHT INC
Doing business as
Number and street (or P.O. box if mail is not delivered to street address) Room/suite
7361 FLAMINGO ST
City or town State ZIP code
CLAY MI 48001
Foreign country name Foreign province/state/county Foreign postal code

D Employer identification number

82-1383709

E Telephone number

(586) 381-6700

G Gross receipts \$ 202,738

F Name and address of principal officer:

SCOTT GATTO 7361 FLAMINGO ST, CLAY, MI 48001

H(a) Is this a group return for subordinates? ☐ Yes ☒ NoH(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions.

H(c) Group exemption number

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

J Website: N/A

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 2017

M State of legal domicile: MI

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities:	TO HELP VETERANS ACHIEVE SUCCESS IN THEIR DAILY LIVES AFTER RETURNING TO CIVILIAN LIFE.	
	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	4
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	4
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	103,550	202,738
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9e, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	103,550	202,738
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	64,190	123,340
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	16b	Total fundraising expenses (Part IX, column (D), line 25)	0	0
Net Assets or Fund Balances	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	42,190	69,832
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	106,380	193,172
	19	Revenue less expenses. Subtract line 18 from line 12	-2,830	9,566
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	460	6,953
22	Net assets or fund balances. Subtract line 21 from line 20	3,920	847	
		-3,460	6,106	

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

SCOTT GATTO

Type or print name and title

ATs Advisors

PRESIDENT

5/15/2022

Date

Paid Preparer Use Only

Print/Type preparer's name

SHANE L RANDELL, CPA

Preparer's signature

Shane Randell, CPA

Date

8/16/2022

Check ☐ if self-employed

PTIN

P01676418

Firm's name ▶ ATs ADVISORS, A CPA FIRM

Firm's address ▶ 875 SOUTH MAIN STREET, PLYMOUTH, MI 48170

Firm's EIN ▶ 38-3327112

Phone no. (734) 454-4100

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

☐ Yes ☒ No

For Paperwork Reduction Act Notice, see the separate instructions.

HTA

Form 990 (2021)