

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III

**1** Briefly describe the organization's mission:

The Lift Garage offers people a vehicle out of poverty by: Providing low-cost quality car repair; Connecting with community partners to strengthen the support network; and Linking customers with needed resources.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 1,485,349. including grants of \$ 0.) (Revenue \$ 377,088.)

The Lift Garage provided low-cost car repairs for Minnesotans who met the 150% Federal Poverty Guideline. During the current year, The Lift Garage repaired 853 cars saving their customers \$638,943 in car repair costs as compared to purchasing those repairs at current market rates. In addition, free inspections were completed on 862 cars with 92 of them receiving advice not to spend money to repair the vehicle as the repair outweighed the value of the vehicle and therefore, saving repair costs. Pre-purchase inspections were performed on 27 cars. Express service appointments were performed for 74 cars providing bulbs at no cost and wiper blades, batteries, and fluid top offs at cost. 73 mobile van inspections were performed to determine if cars should be brought into the shop for repairs.

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services (Describe on Schedule O.)  
(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses 1,485,349.