### **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Check if applicables   Address charges   Address charges as BOOKS FOR KIDS   P1-1600084   P1-	Α	For the	2022 calend	dar year, or tax year beginning	09/01/2022	and ending	08/31/2	2023					
Number and street of Po. Dos. if mail is not delivered to street address)   Room/suite   Entelliption number   206-461-10123	В	Check if	applicable:	C Name of organization PAGE AF	HEAD CHILDRENS LIT	TERACY PROGRAM	1	D Empl	loyer identification number				
In Italian Paumary   1   130 MW 85th Street   13		Address	change	Doing business as BOOKS FO	R KIDS				91-1600084				
Initial return	$\overline{\Box}$	Name ch	ange	Number and street (or P.O. box if	mail is not delivered to st	reet address)	Room/suite	<b>E</b> Telep	hone number				
Friend return/terminated   City or town, state or province, country, and ZIP or toreign postal code   Amended return   Seattle, WA 98117   Filmen and address of principal officer: Susan Dibble   High Are all subcontractes included?   Ves   No 1130 NW 98117   Filmen and address of principal officer: Susan Dibble   High Are all subcontractes included?   Ves   No 1130 NW 98118   Ves   Mo 1130 NW 98117   Filmen and address of principal officer: Susan Dibble   High Are all subcontractes included?   Ves   No 1130 NW 98118   Ves   Ves   Ves   No 1130 NW 98118   Ves   Ves   Ves   Ves   No 1130 NW 98118   Ves	$\overline{\Box}$		•	1130 NW 85th Street					206-461-0123				
Application pending   Filame and address of principal officer: Susan Dibble   Haj is this a group return frootomists? Ves   No Haj is this a group return frootomists? Ves   No Haj is the as group return frootomists? Ves   No Haj is way agree head for succeed by Haj was all subcordinates included?   Ves   No Haj was all subcordinates included?   Ves   No Washer was agreed and the pending of t	$\overline{\Box}$			City or town, state or province, co	ountry, and ZIP or foreign	postal code							
Application pending   Name and address of principal officers. Susain Dibble   Halp hitter group return for subcristaters'   Yes   No   1310 Mesh Str. Street, Sacatel, WA 98117   Tax-excempt status:   501(c)(3)   501(c)(1   ) (insert no.)   4947(a)(1) or   527   Help of commation:   1933   Mistarch a list. See instructions.   Help Group exemption number   Female of Principal   1871   Help of Street   1932   Mistarch a list. See instructions.   Help Group exemption number   Female of Principal   1871   Help of Street   1932   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   Help Group exemption number   1933   Mistarch list. See instructions.   193	П				,,	•		<b>G</b> Gross	s receipts \$ 1.741.444				
130 NW 85th Street, Seattle, WA 98117   Tax-exempt status:	П		1		icer: Susan Dibble		H(a) Is this a gro	oup return f					
Tax-exempt status:		, .ppout.	o poag	1			1 . ,						
Week   Brown organization   Total   Association   Other   L. Year of formation: 1993   M. State of legal domicile: WA	$\overline{}$	Tax-exer	npt status:			4947(a)(1) or 527							
Part   Summary	<u>.</u>	-	·		, ()	1 12 11 (4)(1) 21							
Summary   Singlety describe the organization's mission or most significant activities: Page Ahead helps children in need succeed by developing strong reading skills.    Check this box	<u>к</u>				tion Other	I Year of for							
Briefly describe the organization's mission or most significant activities: Page Ahead helps children in need succeed by developing strong reading skills.	_					2 . 5	1770	··· Otato	or regar derinener W//				
Check this box   if the organization discontinued its operations or disposed of more than 25% of its net assets.				-	ion or most significa	nt activities. Page	Ahead heine chi	ldren in	need succeed by				
B   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tb   0	Ф	'			ion or most significa	in donvinos. Fage	Arieau rieips crii	idi en in	Theed Succeed by				
B   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tb   0	au c		ueveloping strong reading skills.										
B   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tb   0	ĩ	9	Chook this	boy  if the organization di	iccontinued its oper	ations or disposed	of more than 25		to not accote				
B   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tb   0	ŏ			-	·	•		1 1	1				
B   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tb   0	<u>ح</u>												
B   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tb   0	Se Se	1			•	• •	•						
B   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tb   0	Ĭ	1			=								
B   Net unrelated business taxable income from Form 990-T, Part I, line 11   Tb   0	Ċ												
Prior Year   Current Year   1,079,312   1,526,196   9   Program service revenue (Part VIII, line 1b)   1,079,312   1,526,196   1,079,312   1,526,196   1,079,312   1,526,196   1,079,312   1,526,196   1,079,312   1,526,196   1,079,312   1,526,196   1,079,312   1,079,314   1,079,312   1,079,312   1,079,312   1,079,312   1,079,312   1,079,312   1,079,312   1,079,312   1,079,312   1,079,312   1,079,312   1,079,312   1,079,314   1,079,312   1,079,314   1,079,314   1,079,312   1,079,314	⋖				, ,,								
8		ь	Net unrela	ted business taxable income	from Form 990-1, P	art I, line 11							
Program service revenue (Part VIII, line 2g)			0		41.\								
11	ne	1											
11	le n	1	-	•	•		1						
11	Ŗ			•									
13   Grants and similar amounts paid (Part IX, column (A), lines 1–3)   832,779   971,493     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)   328,000   366,843     16   Professional fundraising fees (Part IX, column (A), line 11e)   0   0     17   Other expenses (Part IX, column (D), line 25)   101,580     18   Total expenses. Add lines 13–17 (must equal Part IX, column (A), lines 25)   1,356,183   1,573,686     19   Revenue less expenses. Subtract line 18 from line 12   109,914   106,222     19   Revenue less expenses. Subtract line 18 from line 12   109,914   106,222     10   Total assets (Part X, line 16)   802,716   112,2696     10   Total liabilities (Part X, line 26)   18,898   233,656     10   Total liabilities (Part X, line 26)   18,898   233,656     10   Total liabilities (Part X, line 26)   18,898   233,656     10   Revenue less expenses. Subtract line 21 from line 20   783,818   890,040     Part II   Signature Block		1											
14 Benefits paid to or for members (Part IX, column (A), line 4)		_					1,2	46,269	1,679,908				
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  16a Professional fundraising fees (Part IX, column (A), line 11e)		1				•	8	32,779	971,493				
16a Professional fundraising fees (Part IX, column (A), line 11e)		1	-	-				0	0				
Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)  18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Net assets or fund balances. Subtract line 21 from line 20  24 Part II  25 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.  26 Signature of officer  27 Susan Dibble, Executive Director  Type or print name and title  28 Print/Type preparer's name  29 Print/Type preparer's name  29 Print/Type preparer's name  20 Print/Type preparer's name  20 Print/Type preparer's name  21 Date  22 Net assets or fund balances. Subtract line 21 from line 20  23 Net assets or fund balances. Subtract line 21 from line 20  24 Date  25 Date  26 Date  27 Date  28 Date  29 Date  20 Signature of officer  20 Date  21 Date  22 Date  23 Date  24 Date  25 Date  26 Date  27 Date  27 Date  28 Date  29 Date  20 Check of PTIN Self-employed Print/Type preparer's name  29 Print/Type preparer's name  20 Print/Type preparer	es	1			·		3	28,000	366,843				
Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)  18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Net assets or fund balances. Subtract line 21 from line 20  24 Part II  25 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.  26 Signature of officer  27 Susan Dibble, Executive Director  Type or print name and title  28 Print/Type preparer's name  29 Print/Type preparer's name  29 Print/Type preparer's name  20 Print/Type preparer's name  20 Print/Type preparer's name  21 Date  22 Net assets or fund balances. Subtract line 21 from line 20  23 Net assets or fund balances. Subtract line 21 from line 20  24 Date  25 Date  26 Date  27 Date  28 Date  29 Date  20 Signature of officer  20 Date  21 Date  22 Date  23 Date  24 Date  25 Date  26 Date  27 Date  27 Date  28 Date  29 Date  20 Check of PTIN Self-employed Print/Type preparer's name  29 Print/Type preparer's name  20 Print/Type preparer	) Su							0	0				
Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)  18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23 Net assets or fund balances. Subtract line 21 from line 20  24 Part II  25 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.  26 Signature of officer  27 Susan Dibble, Executive Director  Type or print name and title  28 Print/Type preparer's name  29 Print/Type preparer's name  29 Print/Type preparer's name  20 Print/Type preparer's name  20 Print/Type preparer's name  21 Date  22 Net assets or fund balances. Subtract line 21 from line 20  23 Net assets or fund balances. Subtract line 21 from line 20  24 Date  25 Date  26 Date  27 Date  28 Date  29 Date  20 Signature of officer  20 Date  21 Date  22 Date  23 Date  24 Date  25 Date  26 Date  27 Date  27 Date  28 Date  29 Date  20 Check of PTIN Self-employed Print/Type preparer's name  29 Print/Type preparer's name  20 Print/Type preparer	ă												
19   Revenue less expenses. Subtract line 18 from line 12   -109,914   106,222	Ш	17	Other expe	enses (Part IX, column (A), line	es 11a–11d, 11f–24e	)	1	95,404	235,350				
Beginning of Current Year   End of Year		18	Total expe	nses. Add lines 13-17 (must	equal Part IX, colum	n (A), line 25) .	1,3	56,183	1,573,686				
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  Signature of officer  Susan Dibble, Executive Director  Type or print name and title  Paid  Preparer  Use Only  Print/Type preparer's name  Marci Nakano  Firm's name  Rising Sun Accounting  Firm's address  PO Box 25726, Seattle, WA 98165  Phone no.  206-354-3920			Revenue le	ess expenses. Subtract line 1	8 from line 12		-1	09,914	106,222				
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  Signature of officer  Susan Dibble, Executive Director  Type or print name and title  Paid  Preparer  Use Only  Print/Type preparer's name  Marci Nakano  Firm's name  Rising Sun Accounting  Firm's address  PO Box 25726, Seattle, WA 98165  Phone no.  206-354-3920	or						Beginning of Curr	ent Year	End of Year				
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  Signature of officer  Susan Dibble, Executive Director  Type or print name and title  Paid  Preparer  Use Only  Print/Type preparer's name  Marci Nakano  Firm's name  Rising Sun Accounting  Firm's address  PO Box 25726, Seattle, WA 98165  Phone no.  206-354-3920	sets	20	Total asset	ts (Part X, line 16)			8	02,716	1,122,696				
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  Signature of officer  Susan Dibble, Executive Director  Type or print name and title  Paid  Preparer  Use Only  Print/Type preparer's name  Marci Nakano  Firm's name  Rising Sun Accounting  Firm's address  PO Box 25726, Seattle, WA 98165  Phone no.  206-354-3920	t As	21	Total liabili	ties (Part X, line 26)				18,898	232,656				
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  Signature of officer  Susan Dibble, Executive Director  Type or print name and title  Paid  Preparer's signature  Preparer's signature  Marci Nakano  Firm's name  Rising Sun Accounting  Firm's address  Po Box 25726, Seattle, WA 98165  Phone no. 206-354-3920	울	22	Net assets	or fund balances. Subtract li	ne 21 from line 20		7	83,818	890,040				
Sign Signature of officer Date  Susan Dibble, Executive Director Type or print name and title  Paid Preparer Use Only Firm's name Rising Sun Accounting Firm's address PO Box 25726, Seattle, WA 98165  Date  Check if PTIN PO2473205 Firm's name Rising Sun Accounting Firm's address PO Box 25726, Seattle, WA 98165  Paid Preparer Use Only Firm's address PO Box 25726, Seattle, WA 98165	P	art II	Signatu	re Block									
Sign Signature of officer Date  Here Susan Dibble, Executive Director Type or print name and title  Paid Preparer Use Only Firm's name Rising Sun Accounting Firm's address PO Box 25726, Seattle, WA 98165  Date  Check if Self-employed Print/Type preparer's signature Preparer's signa									my knowledge and belief, it is				
Here Susan Dibble, Executive Director Type or print name and title  Paid Preparer Use Only Print/Type preparer's name Marci Nakano Firm's name Rising Sun Accounting Firm's address PO Box 25726, Seattle, WA 98165  Preparer Preparer's signature Date Check if self-employed PTIN PO2473205 Phone no. 206-354-3920	tru	e, correct	, and complet	e. Declaration of preparer (other than	officer) is based on all info	ormation of which prep	arer has any knowled	ige.					
Here Susan Dibble, Executive Director Type or print name and title  Paid Preparer Use Only Print/Type preparer's name Marci Nakano Firm's name Rising Sun Accounting Firm's address PO Box 25726, Seattle, WA 98165  Preparer Preparer's signature Date Check if self-employed PTIN PO2473205 Phone no. 206-354-3920													
Type or print name and title  Paid Preparer Use Only  Print/Type preparer's name Marci Nakano Preparer Use Only  Print/Type preparer's name Marci Nakano Preparer's signature Proparer's signature Preparer's signature Proparer's signature Preparer's signature Preparer's signature Proparer's signature Preparer's signature Proparer's signature Pro	Si	gn	Signature of	officer			Date						
Print/Type preparer's name Preparer's signature Date Check if self-employed P02473205  Preparer Use Only  Print/Type preparer's name Preparer's signature Date Check if self-employed P02473205  Firm's name Rising Sun Accounting Firm's EIN 82-3726482  Firm's address PO Box 25726, Seattle, WA 98165  Phone no. 206-354-3920	He	ere	Susan Dibl	ble, Executive Director									
Paid         Marci Nakano         P02473205           Firm's name         Rising Sun Accounting         Firm's EIN         82-3726482           Firm's address         PO Box 25726, Seattle, WA 98165         Phone no.         206-354-3920				<u> </u>									
Marci Nakano   Self-employed   P02473205		: al	Print/Type	e preparer's name	Preparer's signature		Date	Check	if PTIN				
Firm's name         Rising Sun Accounting         Firm's EIN         82-3726482           Firm's address         PO Box 25726, Seattle, WA 98165         Phone no.         206-354-3920			Marci Na	kano					nla va d				
Firm's address PO Box 25726, Seattle, WA 98165 Phone no. 206-354-3920		•	r Firms's nor		<u> </u>		Firm's	EIN					
	Us	e Onl	y ———		WA 98165								
	Ma	y the IF				nstructions							

Form 990 (2022) Page **2** 

Part	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:
	Page Ahead helps children in need succeed by developing strong reading skills
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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?
	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 \$ 1,054,018 including grants of \$ 864,066 ) (Revenue \$ 153,129 )
	Book Up Summer: Every summer, while students from affluent families make progress on their reading skills, students from
	low-income families lose ground. The effects of summer learning loss are cumulative, and its compounding impact is responsible
	for much of the reading achievement gap. Book Up Summer addresses this problem, reaching approximately 21,598 students in
	kindergarten through second grade from high-poverty elementary schools, and giving them 12 books each to read during summer
	vacation. Giving children their choice of books furnishes them with the resources and incentive necessary to read during the
	summer, avoid the summer learning loss phenomenon, and ultimately helping to narrow the achievement gap.
4b	(Code:) (Expenses \$ 106,114 including grants of \$ 50,277 ) (Revenue \$ 10,626 )
	Story Leaders: Over the course of a year, low-income children hear 8 million fewer words than children from affluent families.
	Story Leaders aims to close this word gap by facilitating literacy training and access to books for families whose children could
	gain the most from the program. Page Ahead partners with ECEAP and Head Start classrooms to provide early literacy training for teachers, new books for children, and home reading support for families. During the 2022-23 school year, 1,532 students received
	nearly 13,002 new books.
	Ticulty 10,002 new books.
4c	(Code:) (Expenses \$108,222 including grants of \$37,136 ) (Revenue \$609 )
70	Books for Kids: Providing access to books for children in need is a proven way to increase the amount of time they spend reading.
	Page Ahead's original flagship program, Books for Kids, reached 1,736 children in need with 2,437 new, high-quality,
	age-appropriate books in 2022-23. To efficiently reach the children most in need, Page Ahead collaborates with preschools,
	elementary schools, and social service agencies across Washington state. Page Ahead provides a wide variety of books through
	fun, motivational reading events. Empowering children to make their own choices ensures that each child has reading material
	suited to their individual interest.
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 1
Tu	(Expenses \$ 82,659 including grants of \$ 20,014 ) (Revenue \$ 0 )
4e	Total program service expenses 1,351,013

# Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		_
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		_
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10	_	
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	_	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		~
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		~
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	~	
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11e	<b>✓</b>	~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	,	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	441		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14b		<b>V</b>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	15		<i>V</i>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	16		\( \tau \)
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	~	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19	•	·
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	~	

Part	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete Schedule J</i>	23		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		-
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>,</b>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		,
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		V
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		/
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	~	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		_
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		v v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		,
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	~	
Part		•		
	Check if Schedule O contains a response or note to any line in this Part V		 Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   1a   3		168	140
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	<b>/</b>	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<b>-</b>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<i>'</i>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
ou	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Ou		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			
		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		_
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	-		
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a b	Gross income from members or shareholders	_		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
_b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
10	If "Yes," see the instructions and file Form 4720, Schedule N.	40		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		<i>-</i>
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
• •	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.	- '		

Form 990 (2022) Page **6** 

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 14 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 1b 14 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 ~ Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website ✓ Upon request Other (explain on Schedule O) ✓ Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Susan Dibble, (206)461-0123

Part VI

Form 990 (2022) Page **7** 

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

r any relate	d org	aniz			ompe	nsa	ted any current	officer, director,	or trustee.
	(C)								
(B)							(D)	(E)	(F)
Average hours	box,	unles	s pe	erson is both an			Reportable compensation from the	Reportable compensation	Estimated amount of other compensation
(list any hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
40.00									
0.00			~				111,461	0	11,195
2.00									
0.00	~		~				0	0	0
2.00									
0.00	~		~				0	0	0
2.00									
0.00	~		~				0	0	0
2.00									
0.00	~		~				0	0	0
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0.00	~						0	0	0
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2.00									
0.00	~						0	0	0
2.00									
0.00	1			<u> </u>		<u></u>	0	0	0
	(B) Average hours per week (list any hours for related organizations below dotted line)  40.00 0.00 2.00	(B) Average hours per week (list any hours for related organizations below dotted line)  40.00 0.00 2.00	Columbia   Columbia	(B) Average hours per week (list any hours for related organizations below dotted line)  40.00 0.00 2.00	(B) Average hours per week (list any hours for related organizations below dotted line)  40.00 0.00 2.00	Average hours per week (list any hours for related organizations below dotted line)  40.00  0.00  2.00	(B) Average hours per week (list any hours for related organizations below dotted line)  40.00 0.00 2.00	(B) Average hours per week (list any hours for related organizations below dotted line)  40.00 0.00 0.00 0.00 0.00 0.00 0.00 0	CE   Average hours per week (list any hours for related organizations below dotted line)   CE   CE   CE   CE   CE   CE   CE   C

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Emp	oloy	yee	s, an	d F	lighest Compe	nsated Emplo	yees (c	ontinued)
					(0	C)						
	(A) Name and title	(B) Average hours	box,	unles	s pe	more rson	e than of the thick is both or/trus	n an	(D)  Reportable compensation	(E) Reportable compensation	Estimat of	(F) ed amount other
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	fro organiz	ensation m the ration and rganizations
Megar	ı Wells	2.00										
Direct		0.00	-						0	0		0
Ying Z Direct		2.00 0.00	_						0	0		0
			-									
			-									
			-									
1b c	Subtotal	VII, Sectio	 on A		•			· ·	111,461	0		11,195
d									111,461	0		11,195
2	Total number of individuals (including reportable compensation from the organi		limite	d t	o t	hos	e lis	ted	•	eceived more	than \$1	00,000 of
									1			Yes No
3	Did the organization list any <b>former</b> of							-	-			
4	employee on line 1a? <i>If "Yes," complete</i> 3 For any individual listed on line 1a, is the										3	
-	organization and related organizations individual											
5	Did any person listed on line 1a receive of for services rendered to the organization'									tion or individua	5	V
Secti	on B. Independent Contractors								,			
1	Complete this table for your five high compensation from the organization. Repo											
	(A) Name and business add	ress							(B) Description of serv	vices	(C) Compensa	ation
None												
	Total number of independent contractor	rs (includir	na bi	ıt n	ot I	imit	ed to	th	nose listed abov	e) who		
	received more than \$100,000 of compens								0	, -		

#### Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to an	y line in this Pa	rt VIII		$\square$
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
S, S	1a	Federated campaign	ns .		1a	23,682				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b	0				
اع ق	С	Fundraising events			1c	212,315				
fts,	d	Related organization	ns .		1d	0				
اةً ق	е	Government grants	(cont	ributions)	1e	289,000				
ns,	f	All other contribution								
iti e		and similar amounts no	ot inclu	uded above	1f	1,001,199				
년 된	g	Noncash contribution								
nd of				1g						
<u>a</u>	h	Total. Add lines 1a-	-1f .				1,526,196			
o l	_					Business Code				
Š	2a	Program Share				900099	163,755	163,755	0	0
ue ne	b									
n S	С.									
gram Ser Revenue	d									
Program Service Revenue	e	All other program of						0	0	
Δ.	f g	All other program se <b>Total.</b> Add lines 2a-					0 163,755	0	0	0
	3	Investment income					103,733			
	_	other similar amoun					9,354	0	0	9,354
	4	Income from investr					0	0	0	0
	5	D 111					0	0	0	0
		,		(i) Real	l	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6c		0	0				
	d	Net rental income o	r (los	s)						
	7a			(ii) Other						
		sales of assets								
		other than inventory	7a							
ne	b	Less: cost or other basis								
Revenue		and sales expenses .	7b			_				
Be		Gain or (loss)	7c		0	0				
ē	d									
Other	8a	Gross income from events (not including		naraising 212,315						
		of contributions rep								
		1c). See Part IV, line			8a	22,392				
	b	Less: direct expens			8b	61,536				
	C	Net income or (loss)					-39,144		0	-39,144
	9a	Gross income f			Ĭ					
		activities. See Part I	IV, lin	e 19 .	9a					
	b	Less: direct expense	es .		9b					
		Net income or (loss)			tivitie	es				
	10a	Gross sales of ir		=						
		returns and allowan			10a	609				
		Less: cost of goods			10b	0				
	С	Net income or (loss)	) Trom	sales of in	ivento		609	609	0	0
Miscellaneous Revenue	110	Miccollege				Business Code	40.400			40.400
scellaneo Revenue	11a	Miscellaneous				900099	19,138	0	0	19,138
ella Ven	b c									
Sce	d	All other revenue					0	0	0	0
Ξ	e	<b>Total.</b> Add lines 11a					19,138			
	12	Total revenue. See					1,679,908	164,364	0	-10,652

Form 990 (2022) Page **10** 

### Part IX Statement of Functional Expenses

							(4)	<b>(5)</b>	(0)		<b>/=</b> \	
	Check if Schedule O contains a response or note to any line in this Part IX											
sec	iection 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).											

	Check if Schedule O contains a response	e or note to any line	in this Part IX .		📙
	t include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
2	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21  Grants and other assistance to domestic individuals. Can Part IV, line 20	971,493	971,493		
3	individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	138,171	62,177	41,451	34,543
6	Compensation not included above to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ .				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	180,137 9,556	139,546 6,059	12,410	28,181
0		-	-		1,910
9	Other employee benefits	13,552	7,724	2,946	2,882
10	Payroll taxes	25,427	16,363	4,057	5,007
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	28,764		28,764	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.) .	7,596	4,113	3,483	
12	Advertising and promotion	640	565		75
13	Office expenses	75,249	42,162	12,980	20,107
14	Information technology	7,517	1,864	428	5,225
15	Royalties	, ,	,		
16	Occupancy	104,339	92,763	8,346	3,230
17	Travel	6,825	6,184	221	420
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0,023	0,104	221	420
19	Conferences, conventions, and meetings .	27		27	
20	Interest	21		21	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	2.224		2.224	
23	Insurance	3,234		3,234	
		1,159		1,159	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
	(m), amount, his line 24e expenses on somedule 0.)				
а					
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,573,686	1,351,013	121,093	101,580
26	Joint costs. Complete this line only if the			·	•
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
	10110WIIII 301 30-2 (A30 330-120)				Form <b>990</b> (2022)
					Form <b>33U</b> (2022)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this f	Part X		<u> </u>
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	32,771	1	19,749
	2	Savings and temporary cash investments	654,559	2	775,440
	3	Pledges and grants receivable, net	4,500	3	11,174
	4	Accounts receivable, net	15,192	4	24,778
	5	Loans and other receivables from any current or former officer, director			
		trustee, key employee, creator or founder, substantial contributor, or 35%	6		
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined	d		
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	76,669	8	80,335
Ä	9	Prepaid expenses and deferred charges	4,550	9	1,837
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D <b>10a</b> 47,57			
	b	Less: accumulated depreciation <b>10b</b> 41,02	20 8,827		6,553
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	5,648	15	202,830
	16	Total assets. Add lines 1 through 15 (must equal line 33)	802,716		1,122,696
	17	Accounts payable and accrued expenses	18,898	17	20,558
	18	Grants payable		18	
	19	Deferred revenue		19	8,169
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
ies	22	Loans and other payables to any current or former officer, director trustee, key employee, creator or founder, substantial contributor, or 35%			
Ħ		controlled entity or family member of any of these persons	0		
Liabilities	00			22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third	4	24	
	23	parties, and other liabilities not included on lines 17–24). Complete Part >			
		of Schedule D	`	25	203,929
	26	<b>Total liabilities.</b> Add lines 17 through 25	18,898		232,656
'n		Organizations that follow FASB ASC 958, check here	10,070	20	232,030
Ç		and complete lines 27, 28, 32, and 33.			
<u>la</u> n	27	Net assets without donor restrictions	603,642	27	776,706
Ba	28	Net assets with donor restrictions	180,176		113,334
nd		Organizations that do not follow FASB ASC 958, check here	100/170		,
교		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds.		31	
¥ ∤	32	Total net assets or fund balances	783,818	32	890,040
ž	33	Total liabilities and net assets/fund balances	802,716	33	1,122,696

Form 990 (2022) Page **12** 

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			. 🗆	
1	Total revenue (must equal Part VIII, column (A), line 12)		1,67	79,908	
2	Total expenses (must equal Part IX, column (A), line 25)		1,57	73,686	
3	Revenue less expenses. Subtract line 2 from line 1		10	06,222	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		78	33,818	
5	Net unrealized gains (losses) on investments	0			
6	Donated services and use of facilities		0		
7	Investment expenses			0	
8	Prior period adjustments			0	
9	Other changes in net assets or fund balances (explain on Schedule O)			0	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))		89	0,040	
Part	XII Financial Statements and Reporting			_	
	Check if Schedule O contains a response or note to any line in this Part XII			ᅮᆜ	
		_	Yes	No	
1	Accounting method used to prepare the Form 990:  Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain	on			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a		~	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	or			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	. 2b	<b>'</b>		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited or	ı a 📗			
	separate basis, consolidated basis, or both:				
	✓ Separate basis □ Consolidated basis □ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		V		
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	on			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t	the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	. 3a		~	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo to required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.				
	-				

Form **990** (2022)

#### **SCHEDULE A** (Form 990)

(B)

(C)

(D)

(E) **Total** 

**Public Charity Status and Public Support** Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number Name of the organization PAGE AHEAD CHILDRENS LITERACY PROGRAM 91-1600084 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12a, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (iii) Type of organization (v) Amount of monetary (vi) Amount of (i) Name of supported organization (ii) EIN (iv) Is the organization (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support	4		, , ,			
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,068,611	1,121,747	1,094,686	1,079,312	1,526,196	5,890,552
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,068,611	1,121,747	1,094,686	1,079,312	1,526,196	5,890,552
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						785,965
6	Public support. Subtract line 5 from line 4						5,104,587
	on B. Total Support		1				
	dar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	<b>(d)</b> 2021	(e) 2022	(f) Total
7	Amounts from line 4	1,068,611	1,121,747	1,094,686	1,079,312	1,526,196	5,890,552
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,872	2,888	3,727	2,124	9,354	19,965
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				21,827	19,138	40,965
11	<b>Total support.</b> Add lines 7 through 10						5,951,482
12	Gross receipts from related activities, etc.	•	,			12	618,130
13	First 5 years. If the Form 990 is for the		first, second,	third, fourth,	or fifth tax ye	ar as a section	n 501(c)(3)
	organization, check this box and stop her						
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2022 (line 6					14	85.77 %
15	Public support percentage from 2021 Sch					15	89.02 %
16a	331/3% support test—2022. If the organi box and stop here. The organization qual						
h	33 <sup>1</sup> / <sub>3</sub> % support test—2021. If the organization			_			
b	this box and <b>stop here</b> . The organization						
170	10%-facts-and-circumstances test—20			•			
17a	10% or more, and if the organization mets the organization	eets the facts- facts-and-circu	and-circumsta ımstances tes	ances test, che t. The organiza	eck this box a ation qualifies	nd <b>stop here</b> . as a publicly	Explain in supported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	n meets the face facts-and-circ	cts-and-circun cumstances te	nstances test, st. The organiz	check this boz zation qualifies	x and <b>stop her</b> s as a publicly	e. Explain supported
18	<b>Private foundation.</b> If the organization of instructions	did not check	a box on line	13, 16a, 16b,	17a, or 17b,	check this box	x and see

Schedule A (Form 990) 2022 Page **3** 

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support			•			
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
_	'						
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
<u> </u>	line 6.)						
	on B. Total Support	( ) 0040	#1.0040	( ) 0000	/ I) 0004	( ) 0000	(O.T.)
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties, and income from similar sources.						
b	Unrelated business taxable income (less						
D	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
4.4	and 12.)			thind facult	or fifth tower	00.00.00.00.00.00.00.00.00.00.00.00.00.	n F01/c\/0\
14	organization, check this box and <b>stop he</b>	_			-	ear as a secuo	
Secti	on C. Computation of Public Suppor						<u> </u>
15	Public support percentage for 2022 (line			13. column (f))		15	%
16	Public support percentage from 2021 Scl		•			16	<del>%</del>
	on D. Computation of Investment In				<u> </u>	1 1	,,
17	Investment income percentage for 2022 (			by line 13, colu	ımn (f))	17	%
18	Investment income percentage from 202			-			%
19a	331/3% support tests-2022. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2021. If the organize	zation did not c	heck a box on	line 14 or line	19a, and line 16	is more than 3	
	line 18 is not more than 331/3%, check this	box and <b>stop h</b>	ere. The organ	ization qualifies	s as a publicly s	upported organ	nization .
20	Private foundation. If the organization di	id not check a	box on line 14	19a or 19h	check this hox	and see instru	ctions

Schedule A (Form 990) 2022 Page 4

#### **Supporting Organizations** Part IV

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Se

JCCL	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	103	Ito
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
7	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity	6		
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

10b

Schedule A (Form 990) 2022 Page 5 Part IV **Supporting Organizations** (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete **line 2** below. The organization is the parent of each of its supported organizations. *Complete line 3 below.* С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. 3a

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

3b

Schedule A (Form 990) 2022

	Tune III New Functionally Integrated 500(a)(2) Supporting Ora		inations	rage <b>C</b>
Part				
1	Check here if the organization satisfied the Integral Part Test as a qualifying			
Sect	instructions. All other Type III non-functionally integrated supporting organion A—Adjusted Net Income	IIZal	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		(Optional)
_ <u>.</u>	Recoveries of prior-year distributions	2		
_ <del>_</del> _	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
<u>.</u>	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount	•		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional (see instructions)	ally i	integrated Type III suppor	ting organization

Schedule A (Form 990) 2022 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 a From 2017 . . . . . From 2018 **c** From 2019 **d** From 2020 . . . . . **e** From 2021 . . . . Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from Section D, line 7: Applied to underdistributions of prior years Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. Breakdown of line 7: Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . .

Schedule A (Form 990) 2022 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Schedule A, Part II, Line 10 - Miscellaneous Revenue

# SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name o	the organization		Employer identification number
PAGE	AHEAD CHILDRENS LITERACY PROGRAM		91-1600084
Par	Organizations Maintaining Donor Adv	ised Funds or Other Similar Fund	ls or Accounts.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor funds are the organization's property, subject to the	<u> </u>	
6	Did the organization inform all grantees, donors, all only for charitable purposes and not for the beneficonferring impermissible private benefit?	nd donor advisors in writing that grant it of the donor or donor advisor, or for	t funds can be used r any other purpose
Part	Conservation Easements.		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the	• • • • • • • • • • • • • • • • • • • •	
	Preservation of land for public use (for example, recre	•	f a historically important land area
	Protection of natural habitat	☐ Preservation o	f a certified historic structure
•	Preservation of open space		
2	Complete lines 2a through 2d if the organization he easement on the last day of the tax year.	ed a qualified conservation contribution	
			Held at the End of the Tax Year
a			
b	Total acreage restricted by conservation easements		
c d	Number of conservation easements on a certified h Number of conservation easements included in (c)		
	historic structure listed in the National Register .		
3	Number of conservation easements modified, trans		Zu
•	tax year	oren ea, rereadea, extingaleriea, er terri	miated by the organization daming the
4 5	Number of states where property subject to conser Does the organization have a written policy reguiolations, and enforcement of the conservation eas	garding the periodic monitoring, insp	
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing	
7	Amount of expenses incurred in monitoring, inspecting	ng, handling of violations, and enforcing of	conservation easements during the year
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text organization's accounting for conservation easeme	orts conservation easements in its re of the footnote to the organization's fil	evenue and expense statement and
Part	Organizations Maintaining Collections Complete if the organization answered "		Other Similar Assets.
1a	If the organization elected, as permitted under FAS of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote	to its financial statements that describe	es these items.
b	If the organization elected, as permitted under FAS art, historical treasures, or other similar assets held provide the following amounts relating to these item	for public exhibition, education, or resns:	search in furtherance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1</li><li>(ii) Assets included in Form 990, Part X</li></ul>		\$
2	If the organization received or held works of art, following amounts required to be reported under FA	historical treasures, or other similar ASB ASC 958 relating to these items:	assets for financial gain, provide the
a b	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X		\$

Schedu	e D (Form 990) 2022						Page 2
Part		Collections of	Art, Historical	Freasures, or C	ther Similar As	sets (contir	
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth					
а	☐ Public exhibition		d 🗌 Loan	or exchange prog	gram		
b	Scholarly research		e Other				
С	☐ Preservation for future generations		_				
4	Provide a description of the organizat XIII.		nd explain how t	hey further the or	rganization's exem	npt purpose	in Par
5	During the year, did the organization assets to be sold to raise funds rather					r □ Yes	□ No
Part			•				
	Complete if the organization 990, Part X, line 21.		' on Form 990, I	Part IV, line 9, o	r reported an am	ount on Fo	rm
1a	Is the organization an agent, trustee, included on Form 990, Part X?					t 🗌 Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the following t	able:			
					Ar	nount	
С	Beginning balance			<u>  1</u>	С		
d	Additions during the year			<u>  1</u>	d		
е	Distributions during the year			1	е		
f	Ending balance			1	f		
2a	Did the organization include an amour	nt on Form 990, Pa	art X, line 21, for e	scrow or custodi	al account liability	? 🗌 Yes	☐ No
b	If "Yes," explain the arrangement in Pa				•		
	Endowment Funds.		'	•			
	Complete if the organization	answered "Yes"	on Form 990. I	Part IV. line 10.			
	γ ν ν υ υ υ υ υ	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	s back
1a	Beginning of year balance	100,000	100,000	1 1	1		00,000
b	Contributions	0		100,000			-
C	Net investment earnings, gains, and	U	0		0	<u>'</u>	0
·	losses						
	-	0	0	0			0
d	Grants or scholarships	0	0	C	0	)	0
е	Other expenditures for facilities and						
	programs	0	0	C			0
f	Administrative expenses	0	0	C	-	+	0
g	End of year balance	100,000	100,000		· · · · · · · · · · · · · · · · · · ·	1	00,000
2	Provide the estimated percentage of the			ı, column (a)) held	l as:		
а	Board designated or quasi-endowmer	nt <u>o</u> 9	6				
b	Permanent endowment 100	%					
С	Term endowment 0 %						
	The percentages on lines 2a, 2b, and 2						
3a	Are there endowment funds not in the	e possession of th	e organization th	at are held and a	dministered for the	е	
	organization by:					Yes	s No
	(i) Unrelated organizations					3a(i)	V
	.,					3a(ii)	V
b	If "Yes" on line 3a(ii), are the related or					3b	
4	Describe in Part XIII the intended uses	•	•			0.0	
Part			5 GIGOWIIIGILI	u.1.40.			
en t	Complete if the organization		on Form 990 I	Part IV line 11a	See Form 900	Part X line	10
	· • • • • • • • • • • • • • • • • • • •						
	Description of property	(a) Cost or oth	1 ' '		Accumulated depreciation	(d) Book val	ue
	Land	(iiivootiiik	, ,	,			
1a	Land	•	0	0			0
b	Buildings		0	0	0		0
С	Leasehold improvements		0	0	0		0
d	Equipment		0	47,573	41,020		6,553

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

**e** Other

0

0

0

Part VII	Investments – Other Securities.		, <u> </u>
	Complete if the organization answered "Yes" on Form 990, Par	t IV, line 11b. See	Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		
(2) Closely h	neld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	(I)		
	mn (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments—Program Related.	+ IV line 11e Coel	Form 000 Dort V line 12
	Complete if the organization answered "Yes" on Form 990, Par		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(4)			,
(1)			
(2)			
(4)			
(5)			
(6)			
(7)			1
(8)			1
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on Form 990, Par	t IV, line 11d. See	Form 990, Part X, line 15.
	(a) Description	,	(b) Book value
(1) Right Of	Use Assets - Leases		197,182
(2) Security			5,648
(3)	•		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 15.)		202,830
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" on Form 990, Par	t IV, line 11e or 11	f. See Form 990, Part X,
	line 25.		
1.	(a) Description of liability		(b) Book value
(1) Federal in			0
	Portion of Operating Lease		65,629
	rm Portion of Operating Lease		138,300
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	mn (h) must squal Form 000. Part V and (D) line 05.		200
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		203,929
	s liability for uncertain tax positions under FASB ASC 740. Check here if the te		

Schedule D (Form 990) 2022 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements. 1,719,052 2 Amounts included on line 1 but not on Form 990. Part VIII. line 12: Net unrealized gains (losses) on investments . . . . . 0 Donated services and use of facilities 0 h Recoveries of prior year grants . . . . 0 Other (Describe in Part XIII.) . . . . . 39,144 Add lines 2a through 2d . . . . . . 2e 39,144 3 3 Subtract line 2e from line 1 . . . . . 1,679,908 Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 4b 0 Add lines 4a and 4b 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 1,679,908 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . . . 1 1,612,830 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a 0 Prior year adjustments 2b 0 Other losses . . . . . . . . 2c 0 Other (Describe in Part XIII.) . . . . . 39,144 Add lines 2a through 2d . . . 2e 39,144 3 3 Subtract line 2e from line 1 . . . . . . . . 1,573,686 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 Other (Describe in Part XIII.) . . . . . . . . . . . . . . . 4b 0 Add lines **4a** and **4b** . . . . . . . . . . . 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 1,573,686 Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Schedule D, Part V, Line 4 - The endowment funds are permanently restricted and all principal must be retained. Income earned is distrubited on an annual basis to support the general purposes of the organization. Schedule D, Part XII, Line 2d - Special Event Expenses inclued on Page 9, Line 8b

#### **SCHEDULE G** (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Name o	of the organization					Employer identific	cation number
PAGE	AHEAD CHILDRENS LITERACY PR	OGRAM				91-	1600084
Par	Fundraising Activities. Form 990-EZ filers are no				vered "Yes" on F	orm 990, Part IV,	line 17.
1	Indicate whether the organization				owing activities. C	heck all that apply.	
а	☐ Mail solicitations		е	Solicitat	ion of non-governi	ment grants	
b	Internet and email solicitation	ıs	f	Solicitat	ion of government	grants	
С	Phone solicitations		g	Special	fundraising events		
d	☐ In-person solicitations						
2a	Did the organization have a writt						
	or key employees listed in Form	•	=		=	=	
b	If "Yes," list the 10 highest paid			draisers) pu	ursuant to agreem	ents under which th	ne fundraiser is to be
	compensated at least \$5,000 by	the organization	on.				
						63.0	
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody c	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1					1		
2							
3							
4							
5							
8							
9							
10							
Total	<u> </u>						
3	List all states in which the organ	nization is regis	stered or lic	ensed to s	colicit contributions	s or has been notifi	ed it is exempt from
	registration or licensing.						
	·					·	

**Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		grood roccipio groator tric	ι η φο,σσο.			
			(a) Event #1 A Taste for Reading	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
ē			(ovolit type)	(event type)	(total names)	
Revenue	1	Gross receipts	234,707			234,707
ш	2	Less: Contributions	212,315			212,315
	3	Gross income (line 1 minus line 2)	22,392			22,392
	4	Cash prizes	0			0
	5	Noncash prizes	0			0
sesue	6	Rent/facility costs	22,392			22,392
Direct Expenses	7	Food and beverages	0		0	0
Direc	8	Entertainment	0		0	0
	9	Other direct expenses .	39,144			39,144
	10 11	Direct expense summary. Ad				
Da	rt III	Net income summary. Subtra Gaming. Complete if the	actime to nomine 3, c	orad "Vaa" on Farm (	000 Dort IV line 10	-39,144
Га		\$15,000 on Form 990-E	le organization answe 7. line 6a	ered res on Forms	990, Part IV, line 19,	or reported more than
_		ψ10,000 0H1 0HH 000 L	L, iii o oa.	4.5		48 <b>.</b>
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Ver				0 1 0 0		., , , , , , , , , , , , , , , , , , ,
<u></u>	1	Gross revenue				
ses	2	Cash prizes				
Expens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes % ☐ No	<ul><li>☐ Yes %</li><li>☐ No</li></ul>	☐ Yes % ☐ No	
	7	Direct expense summary. Ac	dd lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summar	y. Subtract line 7 from li	ne 1, column (d)		
	_					
9		nter the state(s) in which the or			s?	
	<b>a</b> Is					
	<b>a</b> Is					
10	a Is b If  a W	"No," explain:/ere any of the organization's g		l, suspended, or termina	ated during the tax year	? .

Schedu	ıle G (Form 990) 2022		Page 3
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	☐ Yes	□ No
13 a	Indicate the percentage of gaming activity conducted in:  The organization's facility		%
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes	□ No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$		
С	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	□ Director/officer □ Employee □ Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	☐ Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year		
Part			

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

2022
Open to Public Inspection

**Employer identification number** 

PAGE AHEAD CHILDRENS LITERACY F	PROGRAM						91-1600084
Part I General Information of							
<ol> <li>Does the organization maintain the selection criteria used to av</li> <li>Describe in Part IV the organization</li> </ol>	ward the grants	s or assistance?				r the grants or assista	
						the erganization and	swered "Yes" on Form 990,
Part IV, line 21, for any							swered res on Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Sch I, Stmt 1							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
	.04( )(0)	<u> </u>					
<ul><li>2 Enter total number of section 5</li><li>3 Enter total number of other ord</li></ul>		_					

Schedule I (Form 990) 2022 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (c) Amount of (a) Type of grant or assistance (e) Method of valuation (book, (b) Number of (d) Amount of (f) Description of noncash assistance recipients cash grant noncash assistance FMV, appraisal, other) 3 5 6 Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Schedule I, Part I, Line 2 - Approved partner sites return a completed Memorandum of Understanding (MOU), signed by 3 members of senior staff agreeing to Page Ahead program requirements. Page Ahead utilizes a vendor to deliver the required number of books according to the detail provided in the MOU, so no books are released until its return. Page Ahead is then invoiced by the vendor. Page Ahead staff, board and volunteers participate in site visits annually to assist children with book selection, provide feedback to sites and gain understanding of program effectiveness. Additionally, program sites complete an annual survey providing reporting on key program metrics.

Part II, Line 1

Form: **Schedule I (2022)** EIN: **91-1600084** 

Page: 1

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.
Name and address  IRC code section  Method of valuation	Sun Valley Elementary School 1220 N 16th Ave Sunnyside, WA 98944 91-6001614 FMV	91-6001614		16,727
Desc. of Non-Cash Asst. Purpose of grant	New Childrens Books Summer Reading			
Name and address	Valley View Early Learning Center 17622 46th Ave S Seatac, WA 98188	91-6001631		14,624
IRC code section Method of valuation Desc. of Non-Cash Asst.	91-6001631 FMV New Childrens Books			
Purpose of grant Name and address	Early Literacy  Centralia College ECEAP	91-1195403		13,136
IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	301 S King St Centralia, WA 98531 91-1195403 FMV New Childrens Books Early Literacy			
Name and address  IRC code section  Method of valuation  Desc. of Non-Cash Asst.  Purpose of grant	Sunset Elementary School West 12824 12th Ave Airway Heights, WA 99001 91-0833847 FMV New Childrens Books Summer Reading	91-0833847		12,783
Name and address  IRC code section  Method of valuation	White Center Heights Elementary 10015 6th Avenue Southwest Seattle, WA 98146 91-6001631 FMV	91-6001631		12,636
Desc. of Non-Cash Asst. Purpose of grant	New Childrens Books Summer Reading			
Name and address	Roosevelt Elementary School 405 Bailey Ave Granger, WA 98932	91-6001617		12,427
IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	91-6001617 FMV New Childrens Books Summer Reading			
Name and address IRC code section Method of valuation	Quil Ceda Tulalip Elementary School 2415 74th St NE Tulalip, WA 98271 91-6014415 FMV	91-6014415		12,006

Schedule I, Part IV, Statement 1		PAGE AHEAD CHILDRENS LITERACY PROGRAM	
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Midway Elementary School	91-6001631	11,583
	22447 24th Ave S		•
	Des Moines, WA 98198		
IRC code section	91-6001631		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Bow Lake Elementary School	91-6001631	11,541
Name and address	18237 42nd Ave S	31 333 1331	11,041
	Seatac, WA 98126		
IRC code section	91-6001631		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
-		04.0004024	44.44.4
Name and address	McMicken Heights Elementary	91-6001631	11,414
	3708 South 168th Street		
IDC and anotion	SeaTac, WA 98188		
IRC code section	91-6001631		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Centennial Elementary School	91-6014653	11,245
	3100 Martin Road		
	Mount Vernon, WA 98273		
IRC code section	91-6014653		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Harriet Rowley Elementary School	91-6014653	11,203
	400 53rd St		
	Mount Vernon, WA 98233		
IRC code section	91-6014653		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Sunnycrest Elementary School	91-6001624	10,998
Harris and addition	24629 42nd Ave S	31 0001024	10,390
	Kent, WA 98032		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
		04.0700450	40.050
Name and address	Shiloh Hills	91-0793152	10,953
	505 E Stonewall		
IDC and another	Spokane, WA 99208		
IRC code section	91-0793152		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Madison Elementary School	91-6014653	10,741

Schedule I, Part IV, Statem	nent 1	PAGE AHEAD CHILDRENS LITERACY PROGRAM	
, ,	907 E Fir Street		
	Mount Vernon, WA 98273		
IRC code section	91-6014653		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Mark Twain Elementary School	91-6001624	10,695
Name and address	2450 S Star Lake RD	31 0001024	10,000
	Federal Way, WA 98003		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Hilltop Elementary School	91-6001631	10,615
Name and address	12250 24th Ave S	31 0001031	10,013
	Seattle, WA 98168		
IRC code section	91-6001631		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Jefferson Elementary School	91-6014653	10,530
Name and address	1801 East Balckburn	31-0014033	10,550
	Mount Vernon, WA 98274		
IRC code section	91-6014653		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Wildwood Elementary School	91-6001624	10,512
	2405 S 300th St	0.000.02.	. 0,0 . =
	Federal Way, WA 98003		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Harriet Thompson Elementary School	91-6001612	10,301
	1107 W 2nd Street		,
	Grandview, WA 98930		
IRC code section	91-6001612		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Hazel Valley Elementary School	91-6001631	10,234
	402 SW 132nd St		•
	Burien, WA 98146		
IRC code section	91-6001631		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Olympic Hills School	91-6001541	9,984
	13018 20th Ave NE	-	-,
	Seattle, WA 98125		
IRC code section	91-6001541		
Method of valuation	FMV		

Schedule I, Part IV, Statement 1		PAGE AHEAD CHILDRENS LITERACY PROGRAM	
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Parkside Elementary School	91-6001624	9,815
	2104 S 247th St		2,2.2
	Des Moines, WA 98198		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	McClure Elementary School	91-6001612	9,740
Name and address	McClure Elementary School 811 W 2nd St	91-0001012	9,740
	Grandview, WA 98930		
IRC code section	91-6001612		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
	<del>-</del>		
Name and address	Sheridan Elementary School	91-6001553	9,731
	5317 E McKinley Ave		
	Tacoma, WA 98404		
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Mirror Lake Elementary School	91-6001624	9,699
	3600 S 344th Way		
	Federal Way, WA 98001		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Lake Dolloff Elementary School	91-6001624	9,474
	4200 S 308th St		2,
	Auburn, WA 98001		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
		04 6004604	0.245
Name and address	Valhalla Elementary School 27847 42nd Avenue South	91-6001624	9,345
IRC code section	Auburn, WA 98001 91-6001624		
Method of valuation	91-0001024 FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Liberty Elementary School	91-6014415	9,266
	1919 10th St		
	Marysville, WA 98270		
IRC code section	91-6014415		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Broadview-Thomson Elementary School	91-6001541	9,136
			3,.30

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	13052 Greenwood Ave N		
	Seattle, WA 98133		
IRC code section	91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Tukwila Elementary School	91-6001638	9,097
	5939 S 149th St		
	Tukwila, WA 98168		
IRC code section	91-6001638		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Rainier View Elementary School	91-6001624	9,033
	3015 S 368th St		
	Federal Way, WA 98003		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Boze Elementary	91-6001553	8,970
	1140 E 65th St		
	Tacoma, WA 98404		
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Manitou Park Elementary School	91-6001553	8,847
	4330 S 66th		
	Tacoma, WA 98409		
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	H Stafford Elemenatary School	91-6001553	8,635
	1615 S 92nd St		
	Tacoma, WA 98444		
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Mount View Elementary School	91-6001631	8,635
	10811 12th Ave SW		
IDO 1	Seattle, WA 98146		
IRC code section	91-6001631		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Birney Elementary School	91-6001553	8,593
	7627 S Sheridan Ave		
	Tacoma, WA 98408		
IRC code section	91-6001553		
Method of valuation	FMV		

Schedule I, Part IV, Statement 1		PAGE AHEAD CHILDRENS LITERACY PROGRAM	
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Cascade View Elementary School 13601 32nd Ave S Tukwila, WA 98168	91-6001638	8,551
IRC code section  Method of valuation	91-6001638 FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Olympic View Elementary School 3600 S 344th Way	91-6001624	8,514
IRC code section	Federal Way, WA 98001 91-6001624		
Method of valuation	91-0001024 FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Reed Elementary School 1802 S 36th St Tacoma, WA 98418	91-6001553	8,509
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Cedar Valley Community School 19200 56th Ave West	91-6001871	8,466
IRC code section	Lynnwood, WA 98036 91-6001871		
Method of valuation	91-0001871 FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Panther Lake Elementary School 34424 1st Ave S Federal Way, WA 98003	91-6001624	8,436
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Cedarhurst Elementary School 611 South 132nd Street Burien, WA 98188	91-6001631	8,424
IRC code section	91-6001631		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	College Place Elementary School 20401 76th Ave W Lynnwood, WA 98036	91-6001871	8,424
IRC code section	91-6001871		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Little Mountain Elementary School	91-6014653	8,424

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	1514 S Laventure Rd		
	Mount Vernon, WA 98274		
IRC code section	91-6014653		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Arthur H Smith Elementary School	91-6001612	8,395
Name and address	205 Fir St	31-0001012	0,000
	Grandview, WA 98930		
IRC code section	91-6001612		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Arlington Elementary School	91-6001553	8,340
Nume and address	7202 S Pine St	31 0001000	0,040
	Tacoma, WA 98409		
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Lister Elementary School	91-6001553	8,297
Name and address	2106 E 44th St	91-0001555	0,297
	Tacoma, WA 98404		
IRC code section	91-6001553		
Method of valuation	91-0001333 FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Madrona Elementary School	91-6001631	8,213
	20301 32nd Ave So		
100 L C	SeaTac, WA 98198		
IRC code section	91-6001631		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Kirkwood Elementary School	91-6001615	8,130
	403 S Juniper St		
	Toppenish, WA 98948		
IRC code section	91-6001615		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Valley View Elementary School	91-6001615	8,014
	515 Zillah Ave		
	Toppenish, WA 98948		
IRC code section	91-6001615		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	West Seattle Elementary School	91-6001541	8,002
	6760 34 Ave SW		
	Seattle, WA 98126		
IRC code section	91-6001541		
Method of valuation	FMV		

Schedule I, Part IV, Statement 1		PAGE AHEAD CHILDRENS LITE	RACT PROGRAM
Desc. of Non-Cash Asst. Purpose of grant	New Childrens Books Summer Reading		
	<del>-</del>		
Name and address	Thurgood Marshall Elementary School	91-6001541	7,959
	2401 S Irving St		
RC code section	Seattle, WA 98144 91-6001541		
Method of valuation	91-6001541 FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Washington Elementary School	91-6014653	7,959
	1020 McLean Road		
	Mount Vernon, WA 98273		
RC code section	91-6014653		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Edison Elementary School	91-6001553	7,836
	5830 S Pine		
	Tacoma, WA 98409		
RC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Beverly Park	91-6001631	7,794
	1201 S 104th St		
	Seattle, WA 98168		
RC code section	91-6001631		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	John Muir Elementary School	91-6001541	7,751
tamo ana adaroto	3301 S Horton St	01 0001011	7,701
	Seattle, WA 98144		
RC code section	91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
		04.0440405	7 700
Name and address	Brewster Elementary School	91-0149195	7,709
	502 S 7th Street		
<b></b>	Brewster, WA 98812		
IRC code section	91-0149195		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Delong Elementary School	91-6001553	7,667
	4901 South M St		
	Tacoma, WA 98405		
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address		91-6001582	7 500
wante and address	Scott Elementary School	91-0001362	7,592

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	3737 E 5th Ave		
	Spokane, WA 99202		
IRC code section	91-6001582		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Kendall Elementary School	91-1171985	7,582
	7547 Kendall Road		
	Maple Falls, WA 98266		
IRC code section	91-1171985		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Bailey Gatzert Elementary School	91-6001541	7,540
	1301 E Yesler Way		
	Seattle, WA 98122		
IRC code section	91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Stevens Elementary School	91-6001582	7,510
	1717 E Sinto Ave		
	Spokane, WA 99202		
IRC code section	91-6001582		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Emerson Elementary School	91-6001541	7,456
	9709 60th Ave S		
	Seattle, WA 98108		
IRC code section	91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Mary Lyon Elementary School	91-6001553	7,456
	101 E 46th St		
	Tacoma, WA 98404		
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Rising Star at African American Academy	91-6001541	7,371
	8311 Beacon Ave South		
	Seattle, WA 98102		
IRC code section	91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	South Shore K-8 School	91-6001541	7,371
	4800 S Henderson St		
	Seattle, WA 98118		
IRC code section	91-6001541		
Method of valuation	FMV		

Schedule I, Part IV, Statement 1		PAGE AHEAD CHILDRENS LITERACY PROGRAM	
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Lake Grove Elementary School	91-6001624	7,116
	303 SW 308th St		
	Federal Way, WA 98023		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Silver Lake Elementary School	91-6001624	7,116
namo ana adaroso	1310 SW 325th PI	01 0001021	7,110
	Federal Way, WA 98023		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Star Lake Elementary School	91-6001624	7,077
	3600 S 344th Way		
	Federal Way, WA 98001		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Lowell Elementary School	91-6001541	7,075
	1058 E Mercer		
	Seattle, WA 98102		
IRC code section	91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Longfellow Elementary School	91-6001582	6,955
	800 E Providence Ave		-,
	Spokane, WA 99207		
IRC code section	91-6001582		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
		04 0004024	0.040
Name and address	Seahurst Elementary School	91-6001631	6,949
	14603 14th Ave SW		
IRC code section	Burien, WA 98166		
	91-6001631 FMV		
Method of valuation			
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Thorndyke Elementary School	91-6001638	6,864
	4415 S 150th St		
	Tukwila, WA 98188		
IRC code section	91-6001638		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Mattawa Elementary School	91-6018970	6,848
		3. 33.0070	0,010

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, ,	400 N Boundary		
	Mattawa, WA 99349		
IRC code section	91-6018970		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Union Gap School	91-6001543	6,845
	3201 S 4th St		
	Union Gap, WA 98903		
IRC code section	91-6001543		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Whitman Elementary School 5400 N Helena St	91-6001582	6,779
	Spokane, WA 99207		
IRC code section	91-6001582		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Concord Elementary School	91-6001541	6,572
	723 S Concord St		
	Seattle, WA 98108		
IRC code section	91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Bemiss Elementary School	91-6001582	6,517
	2323 E Bridgeport Ave		
	Spokane, WA 99207		
IRC code section	91-6001582		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Linwood Elementary School	91-6001582	6,511
	906 W Weile Ave		
	Spokane, WA 99208		
IRC code section	91-6001582		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Roxhill Elementary School	91-6001541	6,191
	7740 34th Ave SW		
IDO and a seeds	Seattle, WA 98126		
IRC code section	91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Leschi Elementary School	91-6001541	6,107
	135 32nd Ave		
IDC ands acation	Seattle, WA 98122		
IRC code section Method of valuation	91-6001541 FMV		
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Schedule I, Part IV, Statement 1		PAGE AHEAD CHILDRENS LITERACY PROGRAM	
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Larchmont Elementary School	91-6001553	5,896
	8601 E B St		
	Tacoma, WA 98445		
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Wing Luke Elementary School	91-6001541	5,896
	7201 Beacon Ave S		
	Seattle, WA 98040		
IRC code section	91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Lincoln Elementary School	91-6001615	5,856
	309 N Alder St		
	Toppenish, WA 98948		
IRC code section	91-6001615		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Lidgerwood Elementary School	91-6001582	5,831
	5510 N Lidgerwood St		
	Spokane, WA 99208		
IRC code section	91-6001582		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Dunlap Elementary School	91-6001541	5,603
	4525 S Cloverdale		
IDO and another	Seattle, WA 98118		
IRC code section Method of valuation	91-6001541 FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Martin Luther King JR Elementary School	91-6001541	5,603
	6725 45th Avenue South		
IRC code section	Seattle, WA 98118 91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address		04 6004645	F 500
Name and address	Garfield Elementary School 505 Madison Ave	91-6001615	5,566
	Toppenish, WA 98948		
IRC code section	91-6001615		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
		04 6004552	E 540
Name and address	Fern Hill Elementary School	91-6001553	5,519

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	8442 S Park Ave		
	Tacoma, WA 98444		
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
	<del>-</del>	04.0004544	5.40.4
Name and address	Rainier View Elementary School	91-6001541	5,434
	11650 Beacon Ave S		
	Seattle, WA 98178		
IRC code section	91-6001541		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Washington Elementary School	91-6001614	5,320
	1101 S 9th St		
	Sunnyside, WA 98944		
IRC code section	91-6001614		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Franklin Elementary School	91-6001553	5,307
	1402 S Lawrence St		
	Tacoma, WA 98405		
IRC code section	91-6001553		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Morris Schott Steam Elementary School	91-6018970	5,283
Nume and address	411 E Saddle Mountain Dr	31 0010070	0,200
	Mattawa, WA 99349		
IRC code section	91-6018970		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Cooper Elementary School	91-6001582	5,251
	3200 N Ferrall St		
	Spokane, WA 99217		
IRC code section	91-6001582		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
Name and address	Adelaide Elementary School	91-6001624	5,241
	1635 SW 304th St	31 3031321	0,241
IDC and another	Federal Way, WA 98023		
IRC code section	91-6001624		
Method of valuation	FMV		
Desc. of Non-Cash Asst.	New Childrens Books		
Purpose of grant	Summer Reading		
	·		

# SCHEDULE M (Form 990)

#### **Noncash Contributions**

OMB No. 1545-0047

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

PAGE AHEAD CHILDRENS LITERACY PROGRAM

Employer identification number 91-1600084

Part	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications			57,438	ENAV.			
5	Clothing and household	•		57,436	FIVIV			
Ū	goods							
6	Cars and other vehicles							
6 7	Boats and planes							
8	Intellectual property Securities—Publicly traded							
9								
10 11	Securities—Closely held stock . Securities—Partnership, LLC,							
11	or trust interests							
10								
12 13	Securities – Miscellaneous Qualified conservation							
10	contribution—Historic							
	structures							
14	Qualified conservation							
• •	contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (							
26	Other (	)						
27	Other (							
28	Other (	)						
29	Number of Forms 8283 received	by the or	ganization during the tax y	year for contributions for				
	which the organization completed	Form 8283	3, Part V, Donee Acknowled	dgement	29	0		
							Yes	No
30a	During the year, did the organiza							
	28, that it must hold for at least 3	•						
	used for exempt purposes for the	entire hold	ing period?			30a		~
b	If "Yes," describe the arrangement							
31	Does the organization have a	gift accep	otance policy that require	es the review of any no	onstandard			
						31		~
32a	Does the organization hire or use	•	_	•				
						32a	~	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which column (a)	is checked,			

Schedule M (Form 990) 2022 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Schedule M, Part I, Line 32b - Sell books on Ebay that do not meet Page Ahead's mission of quality and/or age of students served (books for kids 12 and up).

# SCHEDULE O (Form 990)

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

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Department of the Treasury Internal Revenue Service

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

Name of the organization	Employer identification number							
PAGE AHEAD CHILDRENS LITERACY PROGRAM	91-1600084							
Form 990, Part VI, Section A, Line 8b - No committee is authorized to act on behalf of the board.								
Form 990, Part VI, Section B, Line 11b - The form 990 is reviewed first by the Executive Director and then be	by the Audit and Finance							
Committee, which also recommends approval to the board. The board then receives a copy of the Form 99	~							
meeting.								
X								
Form 990, Part VI, Section B, Line 12c - Board members are covered by the conflict of interest policy that i	s reviewed and signed annually							
by all. The Executive Director and Board President review any potential conflicts reported. If a member do								
abstain from discussion and voting.								
Form 990, Part VI, Section B, Line 15 - The board, led by the President, organizes the Executive Director's	review each summer. It was last							
completed in July 2023. Review by the full board is centered on the organizational accomplishments of board policies on ends and								
organizational operation within the boundaries established in board policies on executive limitations. Remuneration is informed by the data								
from the wage and benefit survey Page Ahead participates in for area nonprofits, which is produced annually. There are no other paid								
officers or key employees of the organization.	any. There are no other paid							
officers of key employees of the organization.								
Form 990, Part VI, Section C, Line 19 - Some policies (such as non-discrimination policy) are available on	Daga Ahaad's wahsita Tha							
annual report, most recent audited financial statements and the 990 are posted on Page Ahead's website.								
Page Ahead's entire mailing list.	The annual report is also sent to							
rage Arieau's entire maining list.								
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	·							

#### PAGE AHEAD CHILDRENS LITERACY PROGRAM

Form: Form 990 (2022)

EIN: 91-1600084

Part III, Line 4d

Page: 2

#### **Other Program Services Accomplishments**

Activity Code	Description	Expense	Grants	Revenue
	Book Oasis: In high-income communities, there are about 13 books for every child; in high-poverty communities, there is one book for every 300 children. These neighborhoods are considered book deserts, and the children who live in them have a much harder time accessing the appropriate reading material they need to become strong readers. Book Oasis builds and places specially designed little free libraries in neighborhood book deserts and stocks them with great new children's books for kids to access freely. Volunteers monitor each oasis and restock them monthly. In 22-23, Page Ahead volunteers stocked 19 Book Oasis libraries with 6,456 new children's books through the program.	24,941	19,759	0
	Story Times: Trained volunteers bring reading fun and inspiration to preschool and kindergarten age children in the Puget Sound area and Spokane.	33,693	255	0
	Volunteer Services: Page Ahead volunteers conduct book drives, read with children, and sort and pack books for program sites.	24,025	0	0
Total:		82,659	20,014	0