2023 Exempt Org. Return

prepared for:

LAKE WASHINGTON SCHOOLS FOUNDATION

P.O. BOX 83 REDMOND, WA 98073

Petersen CPAs & Advisors, PLLC

3702 Kern Way Yakima, WA 98902

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

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.

		nue Service		Go to www.	irs.gov/For	m990 for ins	tructions an	d the la	atest in	formation			Inspection
Α	For th	e 2023 calend	dar year, or ta	x year begin	ning	7/01	, 20	023, an	d endin	ig 6/:	30		, 20 2024
В	Check if	applicable:	С								D Employ	er ident	ification number
	Add	dress change	LAKE WASI	HINGTON	SCH001	LS FOUND	ATION				55-0	0891	792
	Nar	me change	P.O. BOX	83							E Telepho		
	Init	ial return	REDMOND,	WA 9807	3						(425	5) 9	36-1414
	Fina	I return/terminated									(, ,	00 1111
	-	ended return									G Gross re	ceints	\$ 673,840.
	\vdash	plication pending	F Name and ad	dress of principa	al officer: T	DENE NE	TTM A NTNT			H(a) Is this	a group return		
			P.O. BOX	83 RED	MUND T	WA 9807				H(b) Are all	subordinates attach a list.	include	
1	Tay-e		X 501(c)(3)	501(c) ()	(insert no.)	4947(a)(1) or	527	. If "No,"	' attach a list.	See ins	structions.
<u>. </u>			W.LWSF.OF			(11130111110.)	+0+7 (u)(1) 01	UL1	U(a) Group	exemption nu	mher	
K			X Corporation	Trust	Association	on Other		I Voor	of format	ion: 200			legal domicile: WA
	rt I	Summary		Trust	ASSOCIATIO	on Other		L Teal	or iornat	1011. 200.	J III 3	tate of i	legal domicile. WA
Га				ation's miss	ion or mo	nst significar	nt activities.	ד קעי) VE	MACHIN	CTOM SO	חחשי	LS FOUNDATION
			UNDS AND										
20													THE FUTURE.
nar		WISHINGI	ON BOHOOL	1 0101111	CI WIII	111111	<u> </u>	1111/1	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Governance	2	Check this bo	x if the	e organizatio	n discont	tinued its on	erations or o	dispose	ed of mo	ore than 2	5% of its	net as	 ssets.
ဗ	3		ting members									3	14
Activities &			dependent vot									4	14
Ę.			of individuals									5	5
Ξį			of volunteers									6	500
Ac			d business re		-	` ,						7a	0.
	b	Net unrelated	business taxa	able income	from For	m 990-1, Pa	art I, line 11.			_		7b	0.
		0			41.						rior Year		Current Year
<u>o</u>			and grants (F								648,4	01.	657,919.
enr			ice revenue (F								0 0	0.0	10.600
Revenue			come (Part VIII.								2,9		12,688.
_			e (Part VIII, co - add lines 8								-33,0 618,3		-37,238. 633,369.
			milar amounts								•		
			to or for mem				•				254,8	90.	203,457.
		•	er compensation	-							100 4	0.0	220 762
es						-			•	-	196,4	99.	220,762.
Expenses			fundraising fee	•	•	•							
×	b	Total fundrais	ing expenses	(Part IX, co	lumn (D)	, line 25)		89,	873.				
ш	17	Other expense	es (Part IX, co	olumn (A), li	nes 11a-	11d, 11f-24e	:)				362,7	76.	356,939.
	18	Total expense	es. Add lines	13-17 (must	equal Pa	rt IX, colum	n (A), line 25	5)			814,1	71.	781,158.
	19	Revenue less	expenses. Su	ubtract line 1	8 from li	ne 12					-195,8	53.	-147,789.
or ces											ng of Curren	t Year	End of Year
Net Assets or Fund Balances	20		Part X, line 1	•							887,2		729,609.
Ass d B	21	Total liabilities	s (Part X, line	: 26)							243,8	71.	234,056.
FE	22	Net assets or	fund balance:	s. Subtract li	ine 21 fro	m line 20					643,3	42.	495,553.
Pa	rt II	Signature	e Block								· ·		·
Unde	er penalti	ies of perjury, I de	clare that I have e	xamined this ret	urn, includin	g accompanying	schedules and	statement	ts, and to	the best of m	y knowledge	and beli	ief, it is true, correct, and
comp	olete. De	claration of prepar	rer (other than offi	cer) is based on	all informati	ion of which pre	parer has any kn	owledge.	•				
Sig	ın	Signature of	officer							Date			
He	re	IRENE	NEUMANN						F	PRESIDE	INT		
			name and title										
		Print/Type pr	reparer's name		Preparer's	signature		Da	ate		Check	I if	PTIN
Pai	id	ANGELA	M. PRAT	T, CPA							self-employe	ed .	P00234617
Pre	pare	r Firm's name		RSEN CPA	S & AD	VISORS.	PLLC				-		
Us	e Onl	y Firm's addre		KERN WA		,					Firm's EIN	26	-1262413
				1A, WA 9							Phone no.		9) 575-1040

No

	990 (2023) LAKE WASHINGTON SCHOOLS FOUNDATION	55-0891792	Page 2
Par	till Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		<u>A</u>
•	THE LAKE WASHINGTON SCHOOLS FOUNDATION RAISES FUNDS AND AMPLIFIES	S COMMINITTY RE	ESOURCES
	TO PROVIDE STUDENTS IN LAKE WASHINGTON SCHOOL DISTRICT WHAT THEY		
	NOW AND IN THE FUTURE.	NEED TO THE V	<u>, </u>
2	Did the organization undertake any significant program services during the year which were not listed on the prior		
	Form 990 or 990-EZ? SEE SCHEDULE O	X Yes	No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program set	rvices? X Yes	s No
	If "Yes," describe these changes on Schedule O. SEE SCHEDULE O		
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported.	ices, as measured by is to others, the total	expenses.
4a	PANTRY PACKS: THE FOUNDATION FUNDED THE PANTRY PACKS PROGRAM, WHI		
	PROGRAM FOR FOOD INSECURE STUDENTS IN THE LAKE WASHINGTON SCHOOL COURSE OF THE TEN MONTH SCHOOL YEAR, 1,000 STUDENTS RECEIVE PACKS WEEKEND.		
	WEEKEND.		-
		· — — — — — — —	
4b	(Code:) (Expenses \$186,692. including grants of \$) (R COMMUNITY GRANTS: THE FOUNDATION GRANTED FUNDS FOR AMAZING READIN OF THE BOOKS, COMMUNITIES IN SCHOOLS, NOTICIAS DE ESPANOL (SPANIS NEWSLETTER) AND OTHER GRANTS TO SUPPORT STUDENTS IN THE LAKE WASH DISTRICT.	SH TRANSLATION	N VIDEO
4c	(Code:) (Expenses \$42,903. including grants of \$) (R INCLUSIVE LIBRARIES: THE FOUNDATION PARTNERED WITH THE SCHOOL DISERPORTS THROUGH THE COMMITMENT OF A 5-YEAR GRANT TO INCREASE THE	STRICT'S EQUIT	
	COLLECTIONS ACROSS THE DISTRICT.		-
			-
			-
		. – – – – – – – – – – – – – – – – – – –	-
4d	Other program services (Describe on Schedule O.) SEE SCHEDULE O		
	(Expenses \$ 62,612. including grants of \$) (Revenue \$ Total program service expenses 668,620.)
	TO THE TAXABLE PROPERTY OF THE		

			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	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Χ	
	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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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		Х
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 "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III.	8		Х
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? If "Yes," complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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	Х	
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		Х
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? If "Yes," complete Schedule D, Part VIII.	11c		Х
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	Χ	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Χ	
f	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)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Χ	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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.	14b		Х
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</i> "Yes," complete Schedule F, Parts II and IV.	15		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		Х
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.	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	Х	
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		Х
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		Х
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	Х	

Form 990 (2023) LAKE WASHINGTON SCHOOLS FOUNDATION Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		Х
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 "Yes," complete Schedule J.</i>	23		Х
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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.	25a		Х
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		Х
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		Х
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		Х
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? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
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		Χ
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Χ
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Х
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		Х
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		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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	Section 501(c)(3) organizations. 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		Х
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? If "Yes," complete Schedule R, Part VI.	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	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		162	NO
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1.	X	
ВΛΛ	(gambling) winnings to prize winners?	1c	Α	(0000

Form 990 (2023) LAKE WASHINGTON SCHOOLS FOUNDATION

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			res	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 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
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		
4 a	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		Х
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).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year			37
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	7f		Х
•	as required?	7 g		
	Form 1098-C?	7h		
0	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	Ů		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.).			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	158		
h	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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O.</i>	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	. 10		
	excess parachute payment(s) during the year?	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would	17		
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
		_		

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year..... 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. **b** Enter the number of voting members included on line 1a, above, who are independent..... 14 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? SEE SCH O Χ 4 Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Did the organization have members or stockholders?..... 6 Χ 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 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..... 9 **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 Χ b 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?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If "No," go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... **c** Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*SEE .SCHEDULE . O Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 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? X a The organization's CEO, Executive Director, or top management official... SEE . SCHEDULE...O...... 15a **b** Other officers or key employees of the organization... SEE . SCHEDULE. Q...... 15b X 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 with a taxable entity during the year?..... 16a X **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 16b organization's exempt status with respect to such arrangements?.. Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records.

(425)

936-1414

KATY PHILIPS P.O. BOX 83 REDMOND WA 98073

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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				(C	;)					
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er an	heck i ss pei	rson i irecto	the both r/trusted Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) KATY PHILIPS	40									
EXECUTIVE DIREC	0			X				98,210.	0.	9,050.
	2	Х						0.	0.	0.
(3) TIM CAMPBELL	2	Λ						0.	0.	0.
TRUSTEE	- 2 -	Х						0.	0.	0.
(4) JOAN KRONA	4							0.	•	<u> </u>
TREASURER	0	Χ		Χ				0.	0.	0.
(5) PRASHANT MISHRA	2								<u>- · · · · · · · · · · · · · · · · · · ·</u>	
TRUSTEE	0	Χ						0.	0.	0.
(6) CATHERINE BOEGER	4									
CO-VICE PRES.	0	Χ		Χ				0.	0.	0.
(7) GIRISH JOSHI	2									
TRUSTEE	0	Χ						0.	0.	0.
(8) SUDHA SHARMA	2									
TRUSTEE	0	Χ						0.	0.	0.
_(9) XUBEI ZHANG	2							_		
TRUSTEE	0	Χ						0.	0.	0.
(10) JING JING WANG TRUSTEE	$-\frac{2}{0}$	Х						0	0.	0
(11) JEN O'DONNELL	2	Λ						0.	0.	0.
TRUSTEE	0	Х						0.	0.	0.
(12) JONATHAN HEUER	4							<u> </u>	· ·	<u> </u>
CO-VICE PRES.	0	Χ		Χ				0.	0.	0.
(13) IRENE NEUMANN	4									
PRESIDENT	0	Χ		Χ				0.	0.	0.
(14) MELINDA LINCICOME	4									
CO-SECRETARY	0	Χ		Χ				0.	0.	0.

Part VII Section A. Officers, Directors, 1ru	131003, 1	\Cy			C)	C3, (and	Trigilest Con	ipensateu Emp	Оусс	• (conti	писи)
(A) Name and title	(B) Average hours per week	box, offic	unles er an	ss pe d a d	more rson i irecto	than o	an ee)	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	compe	(F) ated am of other nsation	from
	(list any hours for related organiza- tions below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the o	rganizat d related anization	tion d
(15) JANA KOEBERLE CO-SECRETARY	- <u>4</u> -	Х		Х				0.	0.			0.
(16)		-										
(17)												
(18)												
(19)												
(20)		-										
(21)												
(22)		-										
(23)												
(24)												
(25)												
1b Subtotal								98,210.	0.		9,()50.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)								98,210. more than \$100,00	0. 0. 0 of reportable comp	ensatio		0. 050.
from the organization 0											Yes	No
3 Did the organization list any former officer, direction line 1a? If "Yes,"complete Schedule J for such	tor, truste h <i>individu</i>	e, ke al	ey e	mple	oyee	e, or	high	nest compensated	employee	. 3	103	Х
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	reportab r than \$1	le co 50,0	тре 00?	ensa If "	ation Yes,	and " con	oth nple	er compensation ete Schedule J for	from	4		V
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? <i>If "Yes"</i>									individual	· — —		X
Section B. Independent Contractors	o, compi		·cric	aurc	. 5 10	<i>51</i> 50	CIT	5013011		. •	<u> </u>	Λ
1 Complete this table for your five highest compensation from the organization. Report compensation.	sated indessation for	epen the c	den alen	t cor dar j	ntra year	ctors endi	tha ng v	t received more the vith or within the or	nan \$100,000 of ganization's tax year			
(A) Name and business address (B) Description of services Comp									Compe	C) ensatio	n	
Total number of independent contractors (including b \$100,000 of compensation from the organization)	ut not limi 0	ited to	o the	se l	listed	d abo	ve)	who received more	than			

Form 990 (2023) LAKE WASHINGTON SCHOOLS FOUNDATION 55-0891792 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII..... (B) Related or (A) Total revenue (D) Unrelated Revenue exempt excluded from tax business under sections 512-514 function revenue revenue ts, Grants, Amounts 1a Federated campaigns **b** Membership dues..... 1b c Fundraising events..... 1с 266,922 Gifts, **d** Related organizations..... 1d e Government grants (contributions) 1e 35,154 Contributions, and Other Sin f All other contributions, gifts, grants, and similar amounts not included above . . . 1f 355,843. Noncash contributions included in 1g 42,975 lines 1a-1f. h Total. Add lines 1a-1f 657,919 **Business Code** Program Service Revenue 2a h All other program service revenue. . . g Total. Add lines 2a-2f Investment income (including dividends, interest, and 12,688 12,688 Income from investment of tax-exempt bond proceeds Royalties..... (i) Real (ii) Personal 6a Gross rents 6a **b** Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other **7a** Gross amount from sales of assets other than inventory **b** Less: cost or other basis 7a 7b and sales expenses c Gain or (loss)..... 7с d Net gain or (loss)..... 8a Gross income from fundraising events Other Revenue (not including \$_ 266,922. of contributions reported on line 1c). 8a **b** Less: direct expenses..... 8b 40,471 -40.4719a Gross income from gaming activities. 9a **b** Less: direct expenses..... 9b c Net income or (loss) from gaming activities..... **10a** Gross sales of inventory, less..... returns and allowances. 0a 10b **b** Less: cost of goods sold.... c Net income or (loss) from sales of inventory..... **Business Code** Miscellaneous 11a O<u>THER INCOME</u> 900099 3,233 3,233 Revenue All other revenue

633,369

15,921

0

e Total. Add lines 11a-11d ...

12

Total revenue. See instructions.....

Part IX Statement of Functional Expenses

Section 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 re	esponse or note to any			
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	199,159.	199,159.	3	
2	Grants and other assistance to domestic individuals. See Part IV, line 22	4,298.	4,298.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	,	,		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	109,782.	66,210.	10,797.	32,775.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	93,791.	63,819.	5,578.	24,394.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	33,731.	03,013.	3,370.	24,334.
9	Other employee benefits	95.	95.		
10	Payroll taxes	17,094.	10,922.	1,374.	4,798.
11	Fees for services (nonemployees):				
	Management				
b	Legal				
С	Accounting	12,215.	9,772.	611.	1,832.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	12,827.	10,183.	573.	2,071.
12	Advertising and promotion	2,718.	56.	2,252.	410.
13	Office expenses	4,694.	2,743.	107.	1,844.
14	Information technology	18,054.	7,176.	296.	10,582.
15	Royalties		.,		
16	Occupancy	15,056.	14,843.	45.	168.
17	Travel	,	,		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	45,975.	45,975.		
23	Insurance	11,238.	7,338.	823.	3,077.
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.)				
а	FOOD PURCHASES	201,951.	201,951.		
b	FOOD DONATION	15,974.	15,974.		
С	BANK AND CREDIT CARD FEES	5,554.	50.	3.	5,501.
d	MISCELLANEOUS EXPENSE	3,802.	3,647.	33.	122.
e	All other expenses.	6,881.	4,409.	173.	2,299.
25	Total functional expenses. Add lines 1 through 24e	781,158.	668,620.	22,665.	89,873.
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)				

Balance Sheet

Part X Check if Schedule O contains a response or note to any line in this Part X..... (A) Beginning of year **(B)** End of year Cash — non-interest-bearing. 1 23,207. 292,006 Savings and temporary cash investments..... 316,798. 2 467,546. Pledges and grants receivable, net..... 3 45,777 34,754. Accounts receivable, net 4 Loans and other receivables from 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..... 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)..... 6 Notes and loans receivable, net..... 7 Inventories for sale or use..... 8 Prepaid expenses and deferred charges..... 9 16,797. 13,549 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10a 5,107 **b** Less: accumulated depreciation..... 10b 5,107. 10c 96. Investments — publicly traded securities..... 11 4,942. 11 12 Investments – other securities. See Part IV, line 11..... 12 13 Investments – program-related. See Part IV, line 11..... 13 14 14 Intangible assets..... 15 Other assets. See Part IV, line 11.... 218,987 182,363. 15 887,213. 16 729,609. 16 Total assets. Add lines 1 through 15 (must equal line 33).... 17 Accounts payable and accrued expenses..... 9,563 17 24,473 18 18 Grants payable 19 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Loans and other 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 22 23 Unsecured notes and loans payable to unrelated third parties..... 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 234,308 25 209,583. Total liabilities. Add lines 17 through 25..... 243,871 26 234,056. Organizations that follow FASB ASC 958, check here **Fund Balances** and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 27 463,500. 27 450,401. Net assets with donor restrictions..... 179,842 45,152. Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. ö Capital stock or trust principal, or current funds..... 29 Net Assets Paid-in or capital surplus, or land, building, or equipment fund..... 30 Retained earnings, endowment, accumulated income, or other funds...... 31 31 32 32 643,342 495,553. Total liabilities and net assets/fund balances..... 33 887,213. 33 729,609.

BAA TEEA0111L 08/23/23 Form **990** (2023)

Par	t 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	6	33,3	369.
2	Total expenses (must equal Part IX, column (A), line 25).	2			L58.
3	Revenue less expenses. Subtract line 2 from line 1	3			789.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			342.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			-
9	Other changes in net assets or fund balances (explain on Schedule O).	9			0.
10					
_	column (B))	10	4	95,5	553.
Par	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				. 🔲
				Yes	No
1	Accounting method used to prepare the Form 990:		_		
	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		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis	ed on a			
b	Were the organization's financial statements audited by an independent accountant?		2b	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separation basis, consolidated basis, or both.				
	X 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 of the audi review, or compilation of its financial statements and selection of an independent accountant?	t, 	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R. Part 200, Subpart F?	Uniform	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required au				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
3AA	TEEA0112L 08/23/23	·	Form	990	(2023)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name o	Name of the organization Employer identification number												
LAK	Ε	WASHINGTON SCHOOLS	FOUNDATION				55-089179	2					
		Reason for Public Cha						ctions.					
The c	rga	inization is not a private found	lation because it is: (I	For lines 1 through 12,	check o	nly one	box.)						
1		A church, convention of church			•	b)(1)(A)((i).						
2		A school described in section	n 170(b)(1)(A)(ii). (Att	ach Schedule E (Form	990).)								
3		A hospital or a cooperative h	ospital service organi	ization described in sec	ction 170	0(b)(1)(A	\)(iii).						
4		A medical research organiza	tion operated in conju	unction with a hospital of	describe	d in sec	tion 170(b)(1)(A)(iii). E	inter the hospital's					
		name, city, and state:											
5		An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or university owned	or opera	ated by	a governmental unit de	escribed in					
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).												
7	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.)												
8		A community trust described	in section 170(b)(1)(A)(vi). (Complete Part I	l.)								
9		An agricultural research organi or university or a non-land-grai											
			0 0	- (see instructions). Litter			and state of the conege t	л 					
10		An organization that normall from activities related to its investment income and unre June 30, 1975. See section!	y receives (1) more the exempt functions, sub- lated business taxable	nan 33-1/3% of its supp oject to certain exception e income (less section	ort from	n contrib (2) no r	nore than 33-1/3% of i	ts support from gross					
11		An organization organized ar		•	etv. See	section	1 509(a)(4).						
12		An organization organized a	nd operated exclusive	ely for the benefit of, to d in section 509(a)(1) o	perform	the fun	actions of, or to carry or (12). See section 509(a	ut the purposes of one					
а		lines 12a through 12d that de Type I. A supporting organization organization(s) the power to re complete Part IV. Sections A	escribes the type of superorised on operated, supervised gularly appoint or elect	upporting organization	and com	ıplete İii	nes 12e, 12f, and 12g.						
b		Type II. A supporting organiz management of the supporting must complete Part IV, Secti	ation supervised or c	ontrolled in connection the same persons that co	with its ontrol or	support manage	ted organization(s), by the supported organizat	having control or ion(s). You					
С		Type III functionally integrated organization(s) (see instruction)	. A supporting organizat ons). You must comp	ion operated in connection olete Part IV, Sections	n with, ar A, D, an	nd function d E.	onally integrated with, its	supported					
d		Type III non-functionally integ functionally integrated. The c instructions). You must com	rated. A supporting org organization generally plete Part IV, Section	anization operated in cor must satisfy a distribu s A and D, and Part V.	nection tion requ	with its s uiremen	supported organization(s) t and an attentiveness) that is not requirement (see					
е		Check this box if the organiz integrated, or Type III non-fu	ation received a writtenctionally integrated :	en determination from t supporting organization	the IRS	that it is	a Type I, Type II, Typ	e III functionally					
f		nter the number of supported	organizations										
g	Pr	ovide the following informatio	n about the supported	d organization(s).									
(i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	iii your g	s the tion listed loverning ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
					Yes	No							
(A)													
(A)													
(B)	3)												
(C)													
(D)													
(E)					<u> </u>								
Total													

Part II 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.)

Section A. Public Support											
begi	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	673,314.	672,740.	664,786.	648,401.	657,919.	3,317,160.				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.				
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.				
4	Total. Add lines 1 through 3	673,314.	672,740.	664,786.	648,401.	657,919.	3,317,160.				
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)						0.				
6	Public support. Subtract line 5 from line 4						3,317,160.				
Sec	tion B. Total Support										
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total				
7	Amounts from line 4	673,314.	672,740.	664,786.	648,401.	657,919.	3,317,160.				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,186.	592.	442.	2,983.	12,688.	19,891.				
9	Net income from unrelated business activities, whether or not the business is regularly carried on	3,233					0.				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.				
	Total support. Add lines 7 through 10						3,337,051.				
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.				
13	First 5 years. If the Form 990 is organization, check this box and										
	tion C. Computation of Pu	blic Support P	ercentage								
	Public support percentage for 20						99.40 %				
15	Public support percentage from	2022 Schedule A,	Part II, line 14			15	99.68%				
16a	33-1/3% support test—2023. If t and stop here. The organization	he organization di qualifies as a pub	d not check the bolicly supported or	ox on line 13, and ganization	d line 14 is 33-1/3	3% or more, check	this box				
b	33-1/3% support test—2022. If the and stop here. The organization	ne organization dic qualifies as a pul	I not check a box olicly supported o	on line 13 or 16a rganization	a, and line 15 is 3	3-1/3% or more, o	check this box				
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this b	oox and stop here	Explain in Part	VI how				
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances te	nd-circumstances est. The organizat	test, check this to ion qualifies as a	pox and stop here publicly supporte	e. Explain in Part d organization	VI how the				
18	Private foundation. If the organization	zation did not che	ck a box on line 1	3, 16a, 16b, 17a	, or 17b, check thi	is box and see ins	structions				

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.)

C	tion A. Dublic Command						
	tion A. Public Support	4 > 0010	43,000	(-) 0001	4.0.000	4 3 0000	
	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
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						
	Total. Add lines 1 through 5 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						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b. 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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or	fifth tax year as a	section 501(c)(3	3)
	tion C. Computation of Pul						
	Public support percentage for 20	•	***		• •		
	Public support percentage from					16	0/0
	tion D. Computation of Inv						
	Investment income percentage f	•					
	Investment income percentage f						
	33-1/3% support tests— 2023. If is not more than 33-1/3%, check 33-1/3% support tests— 2022. If t	this box and sto	p here. The organ	nization qualifies	as a publicly supp	orted organizati	on
	line 18 is not more than 33-1/3% Private foundation. If the organization	, check this box	and stop here. Th	e organization qu	ualifies as a public	ly supported org	ganization

55-0891792

Part IV Supporting Organizations

(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.)

Section 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 Part VI how the supported organizations are designated. If designated by class or purpose, describe			
	the designation. If historic and continuing relationship, explain.	1		
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 Part VI 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.	За		
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 Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
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 Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	: 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 Part VI 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 Part VI, 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	• Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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 benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	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 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 Part VI.	9a		
	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 Part VI.	9b		
C	: 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 Part VI .	9с		
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)? 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		

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Pa	ırt	: IV Supporting Organizations (continued)			
		Lies the exemination accented a gift or contribution from any of the following payment?	_	Yes	No
		Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,			
	tl	the governing body of a supported organization?	11a		
	b A	A family member of a person described on line 11a above?	11b		
	c A	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		
Se	cti	ion B. Type I Supporting Organizations			
				Yes	No
1	0 0 0 ti	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of 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 me 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 power	ore		
		during the tax year.	1		
2	tl b	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		
Se	cti	ion C. Type II Supporting Organizations	I		
		71 11 3 3		Yes	No
1	0	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 t supporting organization was vested in the same persons that controlled or managed the supported organization(s).	ne 1		
Se	cti	ion D. All Type III Supporting Organizations			
				Yes	No
1	о у	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		
2	0	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		
3	v a	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		
Se		ion E. Type III Functionally Integrated Supporting Organizations	I		
1	C	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	:).		
	а	The organization satisfied the Activities Test. Complete line 2 below.			
	b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see instr	uction	s).
2	Δ	Activities Test. Answer lines 2a and 2b below.		Yes	No
	s o r	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 D	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.			
2		Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	2.5		
3	a D	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? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
	b D	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		

55-0891792

Га	Type in Non-1 unctionally integrated 303(a)(3) Supporting Orga	IIIIZat	10113	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No ns mus	ov. 20, 1970 (explain in t complete Sections A	n Part VI). See through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	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		
Sec	tion 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):			
ā	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
(Fair market value of other non-exempt-use assets	1c		
(d Total (add lines 1a, 1b, and 1c)	1d		
•	e 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		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2		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-functionally inte (see instructions).	grated	Type III supporting or	ganization

BAA Schedule A (Form 990) 2023 Schedule A (Form 990) 2023 LAKE WASHINGTON SCHOOLS FOUNDATION 55-0

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) 55-0891792

	1 V Type in Non-Functionally integrated 505(a)(5) Supporting Organizations (Contin	iueu)					
Sec	ection D — Distributions						
1	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	3					
4	Amounts paid to acquire exempt-use assets	4					
5	Qualified set-aside amounts (prior IRS approval required — provide details in Part VI)	5					
6	Other distributions (describe in Part VI). See instructions.	6					
7	Total annual distributions. Add lines 1 through 6.	7					
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8					
9	Distributable amount for 2023 from Section C, line 6	9					
10	Line 8 amount divided by line 9 amount	10					
	dh dh		4111				

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Schedule A (Form 990) 2023 BAA

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Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part 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.)

BAA TEEA0408L 08/14/23 Schedule A (Form 990) 2023

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

Employer identification number

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization

LAKE WASHINGTON SCHOOLS FOUNDATION 55-0891792 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... Aggregate value of contributions to (during year). Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?... Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit?.... Yes Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2a **b** Total acreage restricted by conservation easements..... 2b c Number of conservation easements on a certified historic structure included on line 2a...... d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?.... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1..... (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1.....

b Assets included in Form 990, Part X.....

Part III Organizations Maintaining Co	Directions of Art, n	istoricai Treasures, o	or Other Sillillar As	sets (COITE	nueu)				
3 Using the organization's acquisition, accession, items (check all that apply).	and other records, check	any of the following that ma	ke significant use of its	collection					
a Public exhibition	d Loar	n or exchange program							
b Scholarly research	e Othe	er							
c Preservation for future generations									
4 Provide a description of the organization's collect Part XIII.	·	,							
5 During the year, did the organization solicit of to be sold to raise funds rather than to be m	aintained as part of the	art, historical treasures, or organization's collection?	other similar assets	Yes	No				
Part IV Escrow and Custodial Arrang Complete if the organization a	Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.								
1a Is the organization an agent, trustee, custod on Form 990, Part X?	ian, or other intermedia	ry for contributions or othe	r assets not included	Yes	No				
b If "Yes," explain the arrangement in Part XIII an									
Amount									
c Beginning balance			. 1c						
d Additions during the year			. 1d						
e Distributions during the year			. 1e						
f Ending balance			. 1f						
2a Did the organization include an amount on F	orm 990, Part X, line 2	1, for escrow or custodial a	account liability?	Yes	No				
b If "Yes," explain the arrangement in Part XII	I. Check here if the exp	lanation has been provided	d in Part XIII						
Part V Endowment Funds									
Complete if the organization a	answered "Yes" on	Form 990, Part IV, Iir	ne 10.	+					
(a) Curre	nt year (b) Prior ye	ear (c) Two years back	(d) Three years back	(e) Four yea	rs back				
1a Beginning of year balance									
b Contributions									
c Net investment earnings, gains, and losses									
d Grants or scholarships									
e Other expenditures for facilities and programs									
f Administrative expenses									
g End of year balance									
2 Provide the estimated percentage of the curr	ent year end balance (line 1g, column (a)) held a	S:						
a Board designated or quasi-endowment	8								
b Permanent endowment	%								
c Term endowment %									
The percentages on lines 2a, 2b, and 2c should	egual 100%.								
•	·								
3a Are there endowment funds not in the possession organization by:	on of the organization tha	t are neid and administered t	or the	Yes	No				
(i) Unrelated organizations?				3a(i)	+				
(ii) Related organizations?				3a(ii)	-				
b If "Yes" on line 3a(ii), are the related organize				. 3b	-				
4 Describe in Part XIII the intended uses of the					.1				
Part VI Land, Buildings, and Equipm									
Complete if the organization answered		rt IV line 11a See Form 99	0 Part X line 10						
Description of property				(d) Dooley					
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	alue				
1a Land									
b Buildings									
c Leasehold improvements									
d Equipment		5,107.	5,107.		0.				
e Other									
Total. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part X	, line 10c, column (B))			0.				
BAA			Schedi	ule D (Form 99	0) 2023				

Part VII	Investments — Other Securities Complete if the organization answered "Yes"	on Form 990 Part IV line	N/A 2.11h See Form 990 Part X line 12	
(a) Descri	iption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of	-vear market value
	al derivatives		(-)	<u>,</u>
	held equity interests.			
(3) Other	• •			
		-		
(A) (B) (C) (D) (E)		-		
(C)		-		
(D)		_		
(E)		-		
(F)		-		
(G)		_		
(H)		_		
(l)		_		
` '	nn (b) must equal Form 990, Part X, line 12, column (B))	_		
Part VIII			N/A	
T GIT TIII	Investments — Program Related Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Colun	nn (b) must equal Form 990, Part X, line 13, column (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line Description	e 11d. See Form 990, Part X, line 15.	(b) Book value
(1) ODFI	RATING LEASE RIGHT-OF-USE	<i>Jescription</i>		182,363.
(2)	MATING LEASE RIGHT OF USE			102,303.
(3)				
(4)				
(5)				
(6)				
(7)				
(0)				
(8)				
(9)				
(9) (10)				
(9) (10) Total. (Coll	umn (b) must equal Form 990, Part X, line 15,	column (B))		182,363.
(9) (10)	Other Liabilities			182,363.
(9) (10) Total. (Cold	Other Liabilities Complete if the organization answered "Yes"	on Form 990, Part IV, line		5.
(9) (10) Total. (Colo	Other Liabilities Complete if the organization answered "Yes" (a) Des			
(9) (10) Total. (Cole Part X 1. (1) Feder	Other Liabilities Complete if the organization answered "Yes" (a) Des al income taxes	on Form 990, Part IV, line		5. (b) Book value
(9) (10) Total. (Color Part X 1. (1) Feder (2) OPER	Other Liabilities Complete if the organization answered "Yes" (a) Des	on Form 990, Part IV, line		5. (b) Book value
(9) (10) Total. (Cold Part X 1. (1) Feder (2) OPER (3)	Other Liabilities Complete if the organization answered "Yes" (a) Des al income taxes	on Form 990, Part IV, line		5. (b) Book value
(9) (10) Total. (Cold Part X 1. (1) Feder (2) OPER (3) (4)	Other Liabilities Complete if the organization answered "Yes" (a) Des al income taxes	on Form 990, Part IV, line		5. (b) Book value
(9) (10) Total. (Cold Part X 1. (1) Feder (2) OPER (3)	Other Liabilities Complete if the organization answered "Yes" (a) Des al income taxes	on Form 990, Part IV, line		5. (b) Book value
(9) (10) Total. (Cold Part X 1. (1) Feder. (2) OPER (3) (4) (5) (6) (7)	Other Liabilities Complete if the organization answered "Yes" (a) Des al income taxes	on Form 990, Part IV, line		5. (b) Book value
(9) (10) Total. (Column of the column of th	Other Liabilities Complete if the organization answered "Yes" (a) Des al income taxes	on Form 990, Part IV, line		5. (b) Book value
(9) (10) Total. (Column of the column of th	Other Liabilities Complete if the organization answered "Yes" (a) Des al income taxes	on Form 990, Part IV, line		5.
(9) (10) Total. (Column of the column of th	Other Liabilities Complete if the organization answered "Yes" (a) Des al income taxes	on Form 990, Part IV, line		5. (b) Book value
(9) (10) Total. (Cold Part X 1. (1) Feder (2) OPER (3) (4) (5) (6) (7) (8) (9) (10) (11)	Other Liabilities Complete if the organization answered "Yes" (a) Des al income taxes RATING LEASE LIABILITY	on Form 990, Part IV, line cription of liability	e 11e or 11f. See Form 990, Part X, line 2	5. (b) Book value 209, 583.
(9) (10) Total. (Column 1) 1. (1) Feder (2) OPER (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column 1)	Other Liabilities Complete if the organization answered "Yes" (a) Des al income taxes	on Form 990, Part IV, line cription of liability	e 11e or 11f. See Form 990, Part X, line 2	5. (b) Book value 209, 583.

Pa	rt XI Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per R	eturn	
	Complete if the organization answered "Yes" on Form 990,	Part IV,	, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	663,871.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	7,313.		
c	Recoveries of prior year grants	2c			
c	Recoveries of prior year grants Other (Describe in Part XIII.) SEE PART XIII	2d	23,189.		
6	Add lines 2a through 2d			2e	30,502.
3	Subtract line 2e from line 1			3	633,369.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).			5	633,369.
2	VII D 'II' (E	1 14711	-)	
Pal	rt XII Reconciliation of Expenses per Audited Financial Stateme			Retu	rn
Pa	Complete if the organization answered "Yes" on Form 990,			Retu	rn
1 Pa		Part IV,	line 12a.	Retu	811,660.
	Complete if the organization answered "Yes" on Form 990,	Part IV,	line 12a.	1	
1 2	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements	Part IV,	line 12a.	1	
1 2 a	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	Part IV,	line 12a.	1	
1 2 a k	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	Part IV, 2a 2b 2c	line 12a.	1	
1 2 a k	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	Part IV, 2a 2b 2c	line 12a.	1	
1 2 a k	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	Part IV,	7,313.	1	
1 2 a k	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) SEE PART XIII	Part IV,	7,313. 23,189.	1	811,660.
1 2 a b	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) SEE PART XIII	Part IV,	7,313. 23,189.	1 2e	811,660. 30,502.
1 2 a k c c c c c c c c c c c c c c c c c c	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) SEE PART XIII Add lines 2a through 2d. Subtract line 2e from line 1. 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.	Part IV, 2a 2b 2c 2d 4a	7,313. 23,189.	1 2e	811,660. 30,502.
1 2 a b c c c c c c c c c c c c c c c c c c	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) SEE PART XIII Add lines 2a through 2d. Subtract line 2e from line 1. 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. Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	7,313. 23,189.	1 2e	811,660. 30,502.
1 2 a b c c c c c c c c c c c c c c c c c c	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) SEE PART XIII Add lines 2a through 2d Subtract line 2e from line 1. 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. Other (Describe in Part XIII.) Add lines 4a and 4b	2a 2b 2c 2d 4a 4b	7,313. 23,189.	2e 3	30,502. 781,158.
1 2 a k c c c c c c c c c c c c c c c c c c	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) SEE PART XIII Add lines 2a through 2d. Subtract line 2e from line 1. 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. Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	7,313. 23,189.	2e 3	811,660. 30,502.

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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X - FASB ASC 740 FOOTNOTE

BAA

UNDER PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES, EXCEPT FOR NET INCOME FROM UNRELATED BUSINESS ACTIVITIES. FOR THE YEARS ENDED JUNE 30, 2024 AND 2023, THE FOUNDATION HAD NO UNRELATED BUSINESS ACTIVITIES SUBJECT TO FEDERAL INCOME TAXES.

MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE

FOUNDATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENTS TO THE

Schedule D (Form 990) 2023

Part XIII Supplemental Information (continued)

PART X - FASB ASC 740 FOOTNOTE (CONTINUED)

FINANCIAL STATEMENTS OR THAT CALL INTO QUESTION THEIR TAX-EXEMPT STATUS.

SCHEDULE D, PART XI, LINE 2D
OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

SPECIAL EVENT EXPENSE \$ 23,189.
TOTAL \$ 23,189.

SCHEDULE D, PART XII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S

 SPECIAL EVENT EXPENSE
 \$ 23,189.

 TOTAL \$ 23,189.

BAA TEEA3305L 07/20/23 Schedule D (Form 990) 2023

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

2022

Open to Public Inspection

Name of the organization						Employer identific	ation number
LAKE WASHINGTON SCHOOLS FOUNDATION 55-0891792							
Part I Fundraising Activities. Comple Form 990-EZ filers are not re	quired to comp	lete this p	art.				
1 Indicate whether the organization	raised funds th	rough any	of the foll				
a Mail solicitations			е	Solicitation of non-	governm	ent grants	
b Internet and email solicitations	5		f	Solicitation of gove	ernment	grants	
c Phone solicitations			g	X Special fundraising	events		
d In-person solicitations				<u> </u>			
2a Did the organization have a written o	r oral agreemen	t with anv i	individual (includina officers, directo	rs. truste	es. or kev	
employees listed in Form 990, Par	t VII) or entity	in connect	tion with p	rofessional fundraising	services	?	X Yes No
b If "Yes," list the 10 highest paid indiv compensated at least \$5,000 by the	riduals or entities ne organization.	s (fundraise	ers) pursua	nt to agreements under v	which the	fundraiser is to	be
**		(iii) Did	fundrainar		(v) An	nount paid to	(vi) Amount paid to
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	have custor of contr	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	fundra	etained by) liser listed in olumn (i)	(or retained by) organization
		Yes	No		CC	namm (1)	
1							
•							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total				19.0	1:6: 1:		0.
List all states in which the organization or licensing.	on is registered (or licensed	to solicit o	ontributions or has been	notified i	t is exempt from	registration

Part II 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.

e e			(a) Event #1 SPRING LUNCH (event type)	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))
Revenue	1	Gross receipts	266,922.			266,922.
Σ.	2	Less: Contributions	266,922.			266,922.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
nses	6	Rent/facility costs				
Expe	7	Food and beverages	17,282.			17,282.
Direct Expenses	8	Entertainment				
	9	Other direct expenses	23,189.			23,189.
	10 11	Direct expense summary. Add lines 4 thr Net income summary. Subtract line 10 fr	-			,
Par		Gaming. Complete if the organiza than \$15,000 on Form 990-EZ, lin	ition answered "Ye			·
Revenue		man \$15,000 on 1 on 1 930-∟2, m	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
α.	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)			
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	ın (d)		
а	Is th	er the state(s) in which the organization co be organization licensed to conduct gaming lo," explain:	g activities in each of th	nese states?		
		e any of the organization's gaming license 'es," explain:	es revoked, suspended,	or terminated during th	e tax year?	Yes No

Schedule G (Form 990) 2023	LAKE WASHINGTON SCHO	OOLS FOUNDATION	55-089179	2 Page 3
11 Does the organization cond	uct gaming activities with nonmembers	?		Yes No
	beneficiary or trustee of a trust, or a meml			Yes No
13 Indicate the percentage of ga	ming activity conducted in:			o,
				% %
	of the person who prepares the organization			
Name				
Address				
b If "Yes," enter the amount of gaming revenue retained c If "Yes," enter name and add	ress of the third party:	nization \$	and the amount	
Name				
Address				
16 Gaming manager informati	on:			
Name				
Gaming manager compens	ation \$			
Description of services pro	ided			
Director/officer	Employee [Independent contractor		
17 Mandatory distributions:				
	nder state law to make charitable distributi			Yes No
b Enter the amount of distribut	ons required under state law to be distribut activities during the tax year \$			
Part IV Supplemental In and Part III, lines	formation. Provide the explanation, 9, 9b, 10b, 15b, 15c, 16, and 1	ions required by Part I, line 7b, as applicable. Also pro	e 2b, columns (iii) ovide any additiona	and (v);

information. See instructions.

SCHEDULE I (Form 990)

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.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization	Employer identific	Employer identification number											
LAKE WASHINGTON SCHOOLS FO	55-0891792												
Part I General Information on Grants and Assistance													
 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 													
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on													
Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.													
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) LAKE WASHINGTON SCHOOL DISTRI	01 (001(45		120 152	0			EDUCATION						
REDMOND, WA 97039 (2) NOURISHING NETWORKS CENTRAL 2275 116TH AVE NE	91-6001645		138,153.	0.			EDUCATION FOOD MONGHEDS						
BELLEVUE, WA 98004 (3)			50,000.	0.			FOOD VOUCHERS						
<u>(4)</u>													
<u>(5)</u>													
(6) 													
<u>(7)</u>													
<u>(8)</u>													
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table													

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance

(b) Number of recipients

(c) Amount of noncash assistance

(d) Amount of noncash assistance

(e) Method of valuation (book, FMV, appraisal, other)

(f) Description of noncash assistance

1

2

3

4

5

Part IV | **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

6

7

COMMUNITY GRANTS - DOCUMENTATION OF EXPENDITURES SUCH AS BILLS OR PURCHASE ORDERS ARE REQUIRED PRIOR TO THE DISTRIBUTION OF FUNDS. FOR OTHER GRANTS MADE BY THE FOUNDATION, THE RECEIVING ENTITY MUST PROVIDE DOCUMENTATION OF THE OUTCOMES SPECIFIED IN THE RELATIVE GRANT APPLICATION, INCLUDING, FOR EXAMPLE, THE NUMBER OF STUDENTS SERVED, A FINANCIAL ACCOUNTING OF HOW THE FUNDS WERE EXPENDED, AND THE GENERAL SUCCESS AND/OR CHALLENGES OF THE PROJECT.

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. 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 of the organization Employer identification number 55-0891792 LAKE WASHINGTON SCHOOLS FOUNDATION Part I 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	Metho noncash	od of c	d) determir bution a	ning mounts
1	Art — Works of art					,		
2	Art — Historical treasures							
3	Art — Fractional interests.							
4	Books and publications.							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded	Х	4	27,000.	FMV			
10	Securities – Closely held stock							
11	Securities — Partnership, LLC, or trust interests .							
12	Securities - Miscellaneous							
13	Qualified conservation 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			15,975.	FMV			
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 organization d organization completed Form 8283, Part V, Dones				29			
							Yes	No
30-2	During the year, did the organization receive by contri	hution any n	ronarty ranortad in Part I	lines 1 through 28 that				
Jua	it must hold for at least 3 years from the date of the							
	for exempt purposes for the entire holding period?					30 a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?							
32a	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash							
	contributions?					32 a		Χ
b	If "Yes," describe in Part II.							
33	33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.							

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2023

Part II 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.

BAA TEEA4602L 07/25/23 Schedule M (Form 990) 2023

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.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

LAKE WASHINGTON SCHOOLS FOUNDATION

Employer identification number

55-0891792

FORM 990, PART III, LINE 2 - NEW SERVICES

THE LAKE WASHINGTON SCHOOLS FOUNDATION FUNDED A RESOURCE CALLED CARE SOLACE - A MENTAL HEALTH REFERRAL RESOURCE FOR ALL STUDENTS, STAFF AND FAMILIES IN THE DISTRICT.

FORM 990, PART III, LINE 3 - CEASED CONDUCTING OR SIGNIFICANT CHANGES TO SERVICES

THE LAKE WASHINGTON SCHOOLS FOUNDATION IS NO LONGER PROVIDING THE KIDS COMING TOGETHER PROGRAM. THIS PROGRAM ENDED IN FISCAL YEAR 2024.

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

LINKS: THE LINKS PROGRAM PROVIDES ONE-ON-ONE MENTORING FOR YOUTH IN THE LAKE WASHINGTON SCHOOL DISTRICT. VOLUNTEERS ARE ADULTS FROM VARIOUS BACKGROUNDS, EDUCATIONAL LEVELS, AND STAGES OF LIFE WHO CAN SPARE AN HOUR A WEEK TO SPEND WITH A CHILD. ACTIVITIES VARY, BUT ONE THING REMAINS CONSISTENT: THE ADULT IS THERE TO SUPPORT THE CHILD'S SOCIAL-EMOTIONAL DEVELOPMENT.

YOUTH MENTAL HEALTH FIRST AID- IS A FORMAL, NATIONALLY RECOGNIZED TRAINING PROGRAM
THAT INTRODUCES ADULTS TO THE DISTINCT RISK FACTORS AND WARNING SIGNS OF MENTAL
HEALTH PROBLEMS IN ADOLESCENTS, BUILDS UNDERSTANDING OF THE IMPORTANCE OF EARLY
INTERVENTION, AND TEACHES INDIVIDUALS HOW TO HELP YOUTH WHO ARE IN CRISIS OR
EXPERIENCING A MENTAL HEALTH CHALLENGE.

YOUTH MENTAL WELLNESS: A PROGRAM DEDICATED TO EDUCATION AND AWARENESS OF YOUTH MENTAL HEALTH ISSUES, PROVIDING TRAININGS, MOVIE SCREENINGS, AND RESOURCES TO SUPPORT THE FAMILIES IN THE LAKE WASHINGTON SCHOOL DISTRICT.

KIDS COMING TOGETHER: A TEEN-LED PROGRAM THAT BUILDS LASTING CONNECTIONS BETWEEN

Schedule O (Form 990) 2023 Page 2

Name of the organization

LAKE WASHINGTON SCHOOLS FOUNDATION

55-0891792

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS

THE ORGANIZATION UPDATED IT MISSION STATEMENT.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE FINANCE AND EXECUTIVE COMMITTEES OF THE FOUNDATION'S BOARD OF TRUSTEES REVIEWED AND APPROVED A COMPLETE COPY OF THIS FORM 990 AND THE ENTIRE BOARD OF TRUSTEES WAS ALSO PROVIDED A COPY PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE CONFLICT OF INTEREST POLICY IS REVIEWED DURING THE ONBOARDING OF NEW TRUSTEES.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT
THE BOARD DETERMINES THE EXECUTIVE DIRECTOR'S COMPENSATION.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

THE BOARD DETERMINES THE EXECUTIVE DIRECTOR'S COMPENSATION. THE EXECUTIVE DIRECTOR

PROPOSES A BUDGET, INCLUSIVE OF PERSONNEL EXPENSES, TO THE BOARD FOR APPROVAL. ONCE

APPROVED, THE EXECUTIVE DIRECTOR HAS DISCRETION TO WORK WITHIN THE APPROVED BUDGET

TO SET COMPENSATION FOR ALL EMPLOYEES.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE
GOVERNING DOCUMENTS, POLICIES, AND FORM 990 ARE MADE AVAILABLE UPON REQUEST.

BAA TEEA4902L 07/24/23 Schedule O (Form 990) 2023