## Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Check if applicable:

For the 2021 calendar year, or tax year beginning

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

, 2021, and ending

Open to Public Inspection

, 20

D Employer identification number

	A	ddress change	WISE READERS TO LEAD	DERS		46-4	15351	80			
	N	ame change	15500 STEPHEN S. WIS			E Telephone number					
	In	itial return	LOS ANGELES, CA 9007	1 1		310-	-889-	2254			
	Fir	nal return/terminated									
	Aı	mended return				<b>G</b> Gross re	ceipts \$	533,709.			
	A	pplication pending	<b>F</b> Name and address of principal officer:	ANDREA SONNENBERG		(a) Is this a group return		☐ 163 <u>☐ 110</u>			
			SAME AS C ABOVE		Н	(b) Are all subordinates If "No," attach a list.	included? See instr	uctions. Yes No			
I	Tax-	exempt status:	X 501(c)(3) 501(c) (	) ◀ (insert no.) 4947(a)(1) or	527	,					
J	We	bsite: ► WI	SEREADERSTOLEADERS.O	)RG	н	(c) Group exemption nu	mber <b>&gt;</b>				
K		n of organization:	X Corporation Trust Associ	ciation Other ► L Ye	ear of formatior	: 2014 <b>M</b> s	tate of leg	gal domicile: CA			
Pa	rt I	Summar	/								
	1			most significant activities: THE							
ce			ITERACY AND ENRICHMEN	ROGRAMMING	IN T	HE LOS					
าลท		ANGELES	AREA FOR UNDERSERVED	CHILDKEN.							
Governance	2	Check this bo	x ▶ ☐ if the organization disc	 continued its operations or dispo	sed of more	e than 25% of its	net ass				
Go	3			body (Part VI, line 1a)			3	16			
Activities &	4	Number of inc	lependent voting members of the	ne governing body (Part VI, line	1b)		4	16			
itie	5			ndar year 2021 (Part V, line 2a)			5	0			
ctiv	6			ssary)			6	280			
A				/III, column (C), line 12 Form 990-T, Part I, line 11			7a 7b	0.			
	U	Net unrelated	business taxable income nomi	1 01111 990-1, Fart 1, 1111e 11		Prior Year	70	Current Year			
	8	Contributions	and grants (Part VIII, line 1h)			838,4	90	501,111.			
Revenue	9					030,4	50.	32,500.			
ver	10			es 3, 4, and 7d)		9,1	20.	98.			
Ä	11			6d, 8c, 9c, 10c, and 11e)		-2,5	38.				
	12			t equal Part VIII, column (A), lin		845,0	72.	533,709.			
	13		· ·	lumn (A), lines 1-3)							
	14			umn (A), line 4)							
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)									
Expenses	16 a	Professional	undraising fees (Part IX, columr	n (A), line 11e)							
xpe	b	Total fundrais	ing expenses (Part IX, column (	(D), line 25) ►							
В	17			1a-11d, 11f-24e)		183,1	11.	504,261.			
	18	Total expense	s. Add lines 13-17 (must equal l	Part IX, column (A), line 25)		183,1	11.	504,261.			
	19	Revenue less	expenses. Subtract line 18 from	m line 12		661,9	61.	29,448.			
s or						Beginning of Curren		End of Year			
Assets I Balanc	20		•			1,293,2		1,533,943.			
et Ag	21						17.	1,281.			
Net			fund balances. Subtract line 21	from line 20		1,292,9	14.	1,532,662.			
	rt II	Signatur									
Unde	er penal olete. D	lties of perjury, I de Jeclaration of prepa	clare that I have examined this return, incluer (other than officer) is based on all inform	uding accompanying schedules and statem mation of which preparer has any knowled	ents, and to the ge.	e best of my knowledge	and belief	, it is true, correct, and			
Sig	ın	Signatur	e of officer			Date					
He	re	► ANDI	REA SONNENBERG			PRESIDENT					
			print name and title								
		Print/Type p	eparer's name Prepar	arer's signature	Date	Check	if P	TIN			
Pai	id	STEVEN	J. FISHMAN, CPA STE	EVEN J. FISHMAN, CPA		self-employe	ed P	00160721			
Pre	epare	er Firm's name	► FISHMAN, BLOCK +	DIAMOND, LLP							
Us	e Or	Ily Firm's addre	ss ► 16830 VENTURA BL	LVD STE 400		Firm's EIN	<u>95-</u>	3389582			
			ENCINO, CA 91436	)		Phone no.	(818)	783-7140			
May	the the	IRS discuss th	s return with the preparer show	n above? See instructions				X Yes No			

rai	Check if Schedule O contains a response or note to any line in this Part III
1	
•	Briefly describe the organization's mission:
	THE CHARITY OPERATES A FREE OF CHARGE SUMMER LITERACY AND ENRICHMENT PROGRAM AND
	YEAR-ROUND PROGRAMMING IN THE LOS ANGELES AREA FOR UNDERSERVED CHILDREN.
2	Did the organization undertake any significant program services during the year which were not listed on the prior
	Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	and revenue, if any, for each program service reported.
	(O
4 a	(Code:) (Expenses \$
	THE CHARITY OPERATES A FREE OF CHARGE SUMMER LITERACY AND ENRICHMENT PROGRAM AND
	YEAR-ROUND PROGRAMMING IN THE LOS ANGELES AREA FOR UNDERSERVED CHILDREN.
4 6	(Code: ) (Expenses \$ 89,256. including grants of \$ ) (Revenue \$ 17,500.)
41	<del></del>
	AN IMPORTANT ASPECT OF THE PROGRAM, IN ADDITION TO HELPING THE LOW INCOME STUDENTS,
	IS TO ENGAGE A NEW GENERATION OF VOLUNTEER COMMUNITY LEADERS. OUR PROGRAM CONSISTS OF
	COMMUNITY INVOLVEMENT THROUGH VOLUNTEERS OF ALL AGES TEACHING ENRICHMENT ACTIVITIES
	AND PARENT WORKSHOPS AND ACTING AS CHAPERONES, SUPERVISORS AND DAILY GUEST READERS.
	THE LEADERS OF THE VOLUNTEER HIGH SCHOOL STUDENTS FORM OUR STUDENT BOARD RESPONSIBLE
	FOR PLANNING, PROGRAMMING AND FUNDRAISING AS WELL AS STAYING CONNECTED WITH THE
	CHILDREN THROUGHOUT THE SCHOOL YEAR.
4 c	: (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	<del></del>
4 0	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
10	Total program service expenses ► 371 153

# Form 990 (2021) WISE READERS TO LEADERS Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		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? If 'Yes,' 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.			
a	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a		Х
t	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.	11 b	Х	
C	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	11 c		Х
C	I 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? If 'Yes,' complete Schedule D, Part IX	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	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	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
t	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
k	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? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
	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		Х
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		X
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		X
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	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 (2021) WISE READERS TO LEADERS 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
24	a 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
1	<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c 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		
	<b>d</b> Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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>b</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? <i>If 'Yes,' complete Schedule L, Part I</i> .	25b		Х
26	former officer, director, trusteé, key employee, créator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	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):			
;	<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		Х
1	<b>b</b> A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c 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		Х
29		29		Х
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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	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? If 'Yes,' complete Schedule R, Part 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
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ļ	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		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? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt 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			
1	a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	<b>a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	-		
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 c		
BAA	TEEA0104L 09/22/21	Form	1 <b>990</b> (	(2021

Form 990 (2021) WISE READERS TO LEADERS

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

			res	NO
2 a	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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
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)?	4 a		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?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	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
	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	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?	7 a		Х
h	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		<del></del>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	, 5		
	Form 8282?	7 c		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
Ī	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring			
•	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	0 -		
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 a 9 b		
	Section 501(c)(7) organizations. Enter:	90		
	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		
	of Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	12		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
1.	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
	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? If 'No,' provide an explanation on Schedule O	14 a		- 23
		140		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If 'Yes,' complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any	17		
	activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		

Form 990 (2021) WISE READERS TO LEADERS 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 1 a Enter the number of voting members of the governing body at the end of the tax year. . . . . 16 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.... 16 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? ... SEE SCHEDULE 0 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?.... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a 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?..... 7 a 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 7 b 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?..... 8 b 9 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 Q..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... Χ 10 a 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? 10 b 11 a 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?..... 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?..... 14 Χ 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...... 15 a **b** Other officers or key employees of the organization..... 15 b 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 X taxable entity during the year?..... 16 a **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 organization's exempt status with respect to such arrangements?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > CA 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 Own website Another's website X Upon request 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

WISE DRIVE LOS ANGELES CA 90077 310-889-2265

ANDREA SONNENBERG 15500 STEPHEN S.

Form 990 (2021)	WISE	READERS	TΩ	LEADERS	3

46-4535180

Page 7

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

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

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

- 1 a 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, 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.

X 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	thar	ox, u an of	unles: ficer	eck mores s perso and a	e n	<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated amount	
	hours per	우 호			ruste		П	compensation from the organization (W-2/1099-	compensation from related organizations (W-2/1099-	of other compensation from
	week (list any hours for	Individual trustee or director	Institutional trustee	Officer	Key en	Highest compensated employee	e e	MISC/1099-NEC)	MISC/1099-NEC)	the organization and related organizations
	related organiza- tions	op a	iona		employee	ee t con	Ξ,			organizations
	below	uste	trus		99	pen				
	line)	Ф	tee			satec				
(1) LAURIE BAHAR	0.4									_
DIRECTOR	0	Χ						0.	0.	0.
(2) NICOLE BROOKS	0.4									
DIRECTOR	0	Χ						0.	0.	0.
(3) LAUREN CAMPBELL	0.4									
VICE CHAIR	0	Χ	Į.	X				0.	0.	0.
(4) ANDREA CAYTON	0.4									
DIRECTOR	0	Χ						0.	0.	0.
(5) STEVEN J FISHMAN	0.4									
DIRECTOR	0	Χ						0.	0.	0.
(6) VICTOR LEE	0.4									
DIRECTOR	0	Χ						0.	0.	0.
(7) WENDY SCHWARTZ	0.4									
DIRECTOR	0	Χ						0.	0.	0.
(8) MARTINE SINGER	0.4									
DIRECTOR	0	Χ						0.	0.	0.
(9) RABBI RONALD STERN	0.4									
DIRECTOR	0	Χ						0.	0.	0.
(10) KAREN WEISS	0.4									
DIRECTOR	0	X						0.	0.	0.
(11) ANDREA SONNENBERG	<u>1.3</u>									_
CHAIR OF BOARD	0	X		X				0.	0.	0.
(12) JEREMY ROSEN	_1.1_									
SECRETARY	0	X		X				0.	0.	0.
(13) GLENN SONNENBERG	0.4	l								
TREASURER	0	Χ		X				0.	0.	0.
(14) NANCY EPSTEIN	0.4									_
DIRECTOR	0	Χ						0.	0.	0.

Part VII   Section A. Officers, Directors, Tru		Key	En			es,	and	d Highest Com	pensated Empl	oyees	(conti	nued)
	(B) (C)											
(A)	Average hours	Average (do not check more than one box, unless person is both an		(D) Reportable	<b>(E)</b> Reportable		(F)					
Name and title	per week	offi	cer a	nd a d	direct	or/trus	tee)	compensation from	compensation from related organizations	C	ated amo	
	(list any hours	or di	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the o	nsation t rganizati	ion
	for related	dividual	lutio	cer	emp	est o loye	ner		,		d related anization	
	organiza - tions	Q ₹	na⊟t		oloye	omp						
	below dotted line)	ndividual trustee or director	ruste		ð	ensa						
	ilile)		裕			ated						
(15) LORI GOODMAN	0.4											
DIRECTOR	0	Х						0.	0.			0.
(16) DEBBEE KLEIN SCHWARTZ	0.4											
DIRECTOR	0	Х						0.	0.			0.
(17)												
(18)												
(19)												
(20)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1 b Subtotal							<b></b>	0.	0.			0.
c Total from continuation sheets to Part VII, Secti	on A						<b></b>	0.	0.			0.
d Total (add lines 1b and 1c).							<b></b>	0.	0.			0.
2 Total number of individuals (including but not limited	to those I	isted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	1	
from the organization   0											1	
											Yes	No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc	tor, truste	e, ke	еу е	mplo	oyee	e, or	high	nest compensated	employee	3		X
•												$\overline{}$
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	mp∈ 00?	ensa If '}	ition <i>(es.</i>	and <i>com</i>	oth <i>ole</i>	ier compensation t ite Schedule J for	from			
such individual										4		X
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper	satio	n fr	om	any	unre	late	ed organization or	individual	5		Х
Section B. Independent Contractors	, comple	16 00	JIICC	iuic	3 10	i suc	πρ	er3011				Λ
1 Complete this table for your five highest compen	sated inde	epen	den	t cor	ntra	ctors	tha	t received more th	nan \$100,000 of			
compensation from the organization. Report compen		the c	alen	dar <u>i</u>	year	endı	ng v				•	
<b>(A)</b> Name and business add	ess							(B) Description of	of services	Compe	<b>C)</b> nsatio	n
								·				
2 Total number of independent contractors (including to		ited to	o the	ose I	isted	abo	ve)	who received more	than			
\$100,000 of compensation from the organization	<b>D</b> 0											

		Check if Schedule O contains a response or note	e to any line	e in this Part VI	11		
			Т	(A) otal revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts	1 a b c d e f	All other contributions, gifts, grants, and similar amounts not included above 1 f 484, 2					
Control	h	lines 1a-1f.         1g         2,7           Total. Add lines 1a-1f.	125. •	E01 111			
	- ''	Business Co		501,111.			
enn	2 a	TEEN PROGRAM 611600		17,500.	17,500.		
Program Service Revenue	b			15,000.	15,000.		
vice	С						
Ser	d						
ram	e	All other program service revenue					
J. og		Total. Add lines 2a-2f	<b>•</b>	32,500.			
ш.	3	Investment income (including dividends, interest, and		32,300.			
		other similar amounts)		98.			98.
	4	Income from investment of tax-exempt bond proceed					
	5	Royalties					
	6 a	Gross rents 6a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7 a	Gross amount from (i) Securities (ii) Other	er				
		sales of assets other than inventory 7a					
	b	Less: cost or other basis and sales expenses 7b					
	С	Gain or (loss) 7c					
		Net gain or (loss)					
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c).					
Re		See Part IV, line 18 8a					
her		Less: direct expenses 8b					
₹	С	Net income or (loss) from fundraising events					
		Gross income from gaming activities. See Part IV, line 19					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities	►				
		Gross sales of inventory, less returns and allowances					
		Less: cost of goods sold 10b  Net income or (loss) from sales of inventory					
(0	С	Business Co					
<b>2</b> 6	11 a						
캶	b						
	11 a b c d						
Miscellaneous Revenue							
		Total. Add lines 11a-11d		500 500	00 500	_	2.5
	12	<b>Total revenue.</b> See instructions		533.709	32.500	0	98.

	TIX   Statement of Functional Expens				
Sect	tion 501(c)(3) and 501(c)(4) organizations must com	iplete all columns. All oth	ner organizations must co	mplete column (A).	
	Check if Schedule O contains a r				
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		·		·
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	0.	0.	0.	0.
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				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
a	Management				
Ł	Legal				
(	: Accounting	10,780.		10,780.	
	Lobbying	10/1001		10/1001	
e	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 O.)				
12	Advertising and promotion	1,976.	1,976.		
	Office expenses	555.		555.	
14	Information technology				
15	Royalties				
16	Occupancy	54,425.	33,936.	20,489.	
17	Travel	393.	354.	39.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	1,889.		1,889.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 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.).	9,396.		9,396.	
=	· '	329,419.	240,512.	88,907.	
	PROGRAM EXPENSES			88,907.	
	SCHOLAR TRANSPORTATION	56,176.	<u>56,176.</u>		
	SCHOLAR MEALS	29,519.	29,519.		
	SUMMER BOOKS & SUPPLIES	8,680.	8,680.	1 050	
	All other expenses.	1,053.	271 152	1,053.	^
23	Total functional expenses. Add lines 1 through 24e	504,261.	371,153.	133,108.	0.
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)				

		Check if Schedule O contains a response or note to	any line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing		272,013.	1	248,735.
	2	Savings and temporary cash investments		•	2	,
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		4		
	5	Loans and other receivables from any current or form	er officer director			
	,	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	contributor, or 35%			
		controlled entity or family member of any of these per	rsons		5	
	6	Loans and other receivables from other disqualified pe	` —			
		section 4958(f)(1)), and persons described in section			6	
sts	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
Assets	9	Prepaid expenses and deferred charges			9	
A	10 a	Land, buildings, and equipment: cost or other basis.  Complete Part VI of Schedule D				
	b	Less: accumulated depreciation		10 c		
	11	Investments — publicly traded securities	<u> </u>		11	
	12	Investments — other securities. See Part IV, line 11	-	976,678.	12	1,239,776.
	13	Investments – program-related. See Part IV, line 11.		13		
	14	Intangible assets	<u> </u>		14	
	15	Other assets. See Part IV, line 11	-	44,540.	15	45,432.
	16	Total assets. Add lines 1 through 15 (must equal line	33)	1,293,231.	16	1,533,943.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue	_		19	
	20	Tax-exempt bond liabilities	_		20	
lies	21	Escrow or custodial account liability. Complete Part I			21	
Liabilities	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribu	ricer, airector, trustee, utor, or 35%			
ial		controlled entity or family member of any of these per	rsons		22	
	23	Secured mortgages and notes payable to unrelated the	·		23	
	24	Unsecured notes and loans payable to unrelated third	•		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to related third parties, iplete Part X of Schedule D.	317.	25	1,281.
	26	Total liabilities. Add lines 17 through 25		317.	26	1,281.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	;▶ □			
an	27	Net assets without donor restrictions			27	
Bal	28	Net assets with donor restrictions	<u> </u>		28	
р		Organizations that do not follow FASB ASC 958, che				
Net Assets or Fund Balance		and complete lines 29 through 33.	<u></u>			
ō	29	Capital stock or trust principal, or current funds			29	
ets	30	Paid-in or capital surplus, or land, building, or equipment			30	
1ss	31	Retained earnings, endowment, accumulated income,	<u> </u>	1,292,914.	31	1,532,662.
t te	32	Total net assets or fund balances		1,292,914.	32	1,532,662.
_	33	Total liabilities and net assets/fund balances		1,293,231.	33	1,533,943.
DΛ	Λ.		TFFA01111 09/22/21			Form <b>900</b> (2021)

LOH	11 990 (2021) WISE READERS IO LEADERS 46	-4533	0180		Pa	ge 12
Pa	rt 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		53	33,7	09.
2	Total expenses (must equal Part IX, column (A), line 25)	2		5(	04,2	61.
3	Revenue less expenses. Subtract line 2 from line 1	3			29,4	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			92,9	
5	Net unrealized gains (losses) on investments.	5				
6	Donated services and use of facilities	6		2:	10,3	00.
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 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10		1,532,662		62.
Pa	rt 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: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain					
	on Schedule O.					
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2 a		Χ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review	ved on	а			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
	b Were the organization's financial statements audited by an independent accountant?			2 b		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa	rate				
	basis, consolidated basis, or both:    Separate basis					
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?	t, 		2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain					
2	on Schedule O.					
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			3 a		Χ
	<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required au	ıdit	-			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3 b		

### **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

2021

Open to Public Inspection

Name of the organization Employer identification number WISE READERS TO LEADERS 46-4535180 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 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 II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations ..... **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) 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) ►	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	<b>(e)</b> 2021	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.').	701,257.	588,685.	595,205.	838,490.	501,111.	3,224,748.
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.
	Total. Add lines 1 through 3  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	701,257.	588,685.	595,205.	838,490.	501,111.	3,224,748.
6	shown on line 11, column (f) <b>Public support.</b> Subtract line 5						1,576,212.
Sec	tion B. Total Support						1,648,536.
Cale	ndar year (or fiscal year	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	<b>(e)</b> 2021	(f) Total
7	Amounts from line 4	701,257.	588,685.	595,205.	838,490.	501,111.	3,224,748.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		47.	23,850.	9,120.	98.	33,115.
9	Net income from unrelated business activities, whether or not the business is regularly carried on		57.0	==,,===	,,==,,		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						3,257,863.
	Gross receipts from related activ	,	•			!	0.
	First 5 years. If the Form 990 is organization, check this box and			third, fourth, or fi	fth tax year as a	section 501(c)(3)	▶□
Sec	tion C. Computation of Pul Public support percentage for 20	olic Support P	ercentage	ne 11 column (f)	<u> </u>	14	FO 60 %
	Public support percentage from 2						50.60 % 54.70 %
16a	<b>33-1/3% support test—2021.</b> If the and <b>stop here.</b> The organization	ne organization di qualifies as a pub	d not check the bo	ox on line 13, and ganization	d line 14 is 33-1/3	% or more, check	this box
b	<b>33-1/3% support test—2020.</b> If th and <b>stop here.</b> The organization						
17a	7a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-a l-circumstances te	nd-circumstances est. The organizati	test, check this bon qualifies as a	oox and <b>stop here</b> publicly supporte	LExplain in Part of organization	VI how the ►
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check thi	s 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.)

Sec	tion A. Public Support	ote neted peren,	picase complete i	<u> </u>			
	lar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(4) 2017	(8) 2010	(4) = 1.0	(4) 2525	(6) 2321	(i) rotar
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						
	<b>Total.</b> 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						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support				T	1	
	dar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	<b>(e)</b> 2021	(f) Total
	Amounts from line 6 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.)						
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is organization, check this box and						
	tion C. Computation of Pul						
	Public support percentage for 20	•	.,,		•		જ
	Public support percentage from 2					16	%
Sec	tion D. Computation of Inv						
17		•	• • •	-			%
18	18 Investment income percentage from 2020 Schedule A, Part III, line 17						왕
	<b>33-1/3% support tests—2021.</b> If t is not more than 33-1/3%, check	this box and <b>sto</b>	<b>p here.</b> The organ	ization qualifies a	as a publicly supp	orted organization	
	b 33-1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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 <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe	•		
	the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or 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 <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI.</b>	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9с		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

BAA TEEA0404L 08/31/21 Schedule A (Form 990) 2021

Pa	art IV	Supporting Organizations (continued)			
				Yes	No
11		the organization accepted a gift or contribution from any of the following persons?			
	a A per the g	son who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, overning body of a supported organization?	11a		
	<b>b</b> A fan	nily member of a person described on line 11a above?	11b		
	<b>c</b> 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 <b>Part VI.</b>	11c		
Se	ction	B. Type I Supporting Organizations		ı	
_	D: 1.0			Yes	No
1	or mo office organ than were	the governing body, members of the governing body, officers acting in their official capacity, or membership of one one supported organizations have the power to regularly appoint or elect at least a majority of the organization's errs, directors, or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> how the supported inization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers by the tax year.	1		
2	that o	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Se	ction	C. Type II Supporting Organizations			
				Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees			
	supp	ich of the organization's supported organization(s)? If No,' describe in <b>Part VI</b> how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ction	D. All Type III Supporting Organizations	•	I	1
		2.7.m 1,7p0 m cupporting crgam=ution3		Yes	No
1	Did the organ	he organization provide to each of its supported organizations, by the last day of the fifth month of the nization'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	1		No
	orgar	nization's governing documents in effect on the date of notification, to the extent not previously provided?	'		
2	Were organ the o	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice all tir	ason of the relationship described on line 2, above, did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played is regard.	3		
Se	ction	E. Type III Functionally Integrated Supporting Organizations			
1	Chock	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	믐	The organization satisfied the Activities Test. Complete line 2 below.			
	=	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	c 📙 1	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see	: instri	uction	s).
2	2 Activ	ities Test. Answer lines 2a and 2b below.		Yes	No
	suppo <b>orga</b> i respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported</b> **nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted			
	subst	tantially all of its activities.	2a		
	more	he activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the			
		ons for the organization's position that its supported organization(s) would have engaged in these activities or the organization's involvement.	2b		
3	<b>P</b> arei	nt of Supported Organizations. Answer lines 3a and 3b below.			
		he organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? If 'Yes' or 'No,' provide details in <b>Part VI</b> .	3a		
		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain in t complete Sections A	n Part VI). <b>See</b> Athrough 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):			
- 6	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	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	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> 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).	egrated	Type III supporting or	ganization

BAA Schedule A (Form 990) 2021

Pai	Part V   Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sec	Section 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 <b>Part VI</b> )	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 <b>Part VI</b> ). See instructions.	8					
9	Distributable amount for 2021 from Section C, line 6	9	_				
10	Line 8 amount divided by line 9 amount	10					

Line 8 amount divided by line 9 amount		10	
Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required — <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021			
<b>a</b> From 2016			
<b>b</b> From 2017			
<b>c</b> From 2018			
<b>d</b> From 2019			
<b>e</b> From 2020			
f Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
<b>b</b> Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

BAA Schedule A (Form 990) 2021

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.)