** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

A F	or the	2022 calendar year, or tax year beginning JUI	ົ່ 1, 2022 aı	nd ending	JUN 30), 2023				
	heck if	C Name of organization	•		D Emp	lover identific	ation number			
а	pplicable									
	Addres	$^{\circ}$ FOUNDATION FOR VANCOUVER	PUBLIC SCHOO	LS						
	Name change	Doing business as FOUNDATION FO			5 91	L-097180	0.0			
\equiv	Initial return	Number and street (or P.O. box if mail is not delive		Room/suit		phone number				
F	Final	PO BOX 6039	rea to street address;	1100111/3011		360)313				
	⊣return/ termin- ated	City or town, state or province, country, and ZIF	or foreign postal code		G Gross		5,941,09	94.		
	Amend		or foreign postar oode			his a group re				
\equiv	Applica		DAVIS			for subordinates? Yes X No				
	pendin	SAME AS C ABOVE						No		
1 7	3V-0V0	mpt status: X 501(c)(3) 501(c) ()	(insert no.) 4947(a)(1) or 52			list. See instructions	_		
	Vebsit			1) 01 34		oup exemption				
		organization: X Corporation Trust Associ		I Vo			State of legal domicile	- TAT Z		
		Summary	Sidilon Unio	L 16	ai ui iuiiialiu	<u>лі. 1900 ги</u>	1 State of legal domicile	;. VVZ1		
		Briefly describe the organization's mission or most sig	unificant activities: TO	BRING	тостт	THT THE	RESOURCES			
9		OF THE COMMUNITY TO SUPPLEM								
jan	-	Check this box if the organization disconting								
Governance	l	Number of voting members of the governing body (Pa					eis.	22		
9	l	Number of voting members of the governing body (Fa	, , , , , , , , , , , , , , , , , , , ,	١				22		
જ								8		
Activities &		Total number of individuals employed in calendar year						30		
ŧi		Total number of volunteers (estimate if necessary)						0.		
Ą		Total unrelated business revenue from Part VIII, colum			0.					
en	<u> </u>	Net unrelated business taxable income from Form 990	J-1, Part I, line 11				Current Year	••		
	١, ,	Contributions and grants (Dort VIII line 1h)		F		59,868.	1,653,35	52		
	l	(5 1) (11 11 6)			1,20	0.	1,000,00	0.		
Revenue	l				<i>1</i> F	57,918.	-105,35	<u> </u>		
Вè		nvestment income (Part VIII, column (A), lines 3, 4, an				34,750.	-42,07			
	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9d				93,036.	1,505,92			
		Total revenue - add lines 8 through 11 (must equal Pa				11,808.	333,36			
	l	Grants and similar amounts paid (Part IX, column (A),	4\			0.	333,30	0.		
	ı	Benefits paid to or for members (Part IX, column (A), li	,		2 5	8,225.	364,71			
es		Salaries, other compensation, employee benefits (Par				0.	304,71	0.		
Expenses		Professional fundraising fees (Part IX, column (A), line	0 - 4	H		· ·		<u> </u>		
Ϋ́	l	Total fundraising expenses (Part IX, column (D), line 2			0.1	L0,830.	1,043,19	2.4		
_		Other expenses (Part IX, column (A), lines 11a-11d, 11				30,863.	1,741,26			
	l	Total expenses. Add lines 13-17 (must equal Part IX, o				A 1 = A				
_ 0	19 1	Revenue less expenses. Subtract line 18 from line 12				L2,173. Current Year	-235,34 End of Year	<u> </u>		
t Assets or d Balances		Tatal accests (Dart V. Line 10)			<u> </u>	19,733.	12,058,74	11		
Sse Bala	20	otal assets (Part X, line 16) otal liabilities (Part X, line 26)		·····		20,733.	200,31			
nd/		, , , , , , , , , , , , , , , , , , , ,	- 00	·····		29,017.	11,858,43			
Pa	rt II	Net assets or fund balances. Subtract line 21 from line Signature Block	3 20		10,02	37,017.	11,030,43	/ = •		
		ties of perjury, I declare that I have examined this return, inc	luding accompanying schedu	ılac and etataı	mente and to	the heet of my	knowledge and helief i	it ic		
	-	, and complete. Declaration of preparer (other than officer) i				-	Knowledge and beller, i	1 13		
i uo,	COLLECT	, and complete. Declaration of proparer (other than officer) i	5 based on an imormation of	willon propar	ci nas any kn	iowicage.				
Sigi	, I	Signature of officer				Date				
Jer Jer		JENNY THOMPSON, EXECUTIVE D	TRECTOR							
ICI	• i	Type or print name and title	INDOIGN							
			eparer's signature		Date	Check	PTIN			
aid	l	JESSICA YODER	charci 2 Signature			if L		5		
	arer	Firm's name MCDONALD JACOBS, P.	<u>C</u> .		1	self-employer Firm's EIN 9	3-0900579			
	Only	Firm's name MCDONALD JACOBS, F. Firm's address 121 SW SALMON ST.,				FILLIS EIN 3	5 0,000,13			
Jac	Unity	PORTLAND, OR 97204	DIE TIOO			Dhone no / 5	03) 227-058	₹1		
1/10:	the ID	S discuss this return with the preparer shown above?	2 Soo instructions			F110118 110. \ 3	X Yes	No		
viav	ᆔᆫᅜ	o algougg this return with the preparet SHOWH above !	OGE IHALI UULUHA				144 155	INO		

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO BRING TOGETHER THE RESOURCES OF THE COMMUNITY TO SUPPLEMENT AND
	ENHANCE STUDENT ACHIEVEMENT. TO CREATE OPPORTUNITIES THAT CULTIVATE
	AND INSPIRE STUDENT SUCCESS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1, 240, 548 . including grants of \$333, 360 .) (Revenue \$)
та	THE FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS MANAGES PRIVATELY DONATED
	FUNDS TO BENEFIT VANCOUVER SCHOOL DISTRICT STUDENTS AND FAMILIES SO
	THAT STUDENTS ARE PREPARED, CONFIDENT AND EXCITED TO LEARN.
	THAT STODENTS ARE TREFARED, CONFIDENT AND EXCITED TO BEARN.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 1,240,548.
	Form 990 (2022)

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Part IV | Checklist of Required Schedules

 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidat public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election 	2 tes for 3 n in effect 4 nts, or	X	v
 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidat public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election 	tes for 3 n in effect 4 nts, or		v
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public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election	n in effect 4		l v
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election	n in effect4 nts, or		X
	4 nts, or	1	
during the tax year? If "Yes," complete Schedule C, Part II	nts, or		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessmen			
similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
			
,	-		x
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule	e D, Part I <u>6</u>		- 22
7 Did the organization receive or hold a conservation easement, including easements to preserve open space,			₩
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete the organization maintain collections of works of art, historical treasures, or other similar assets?			7.7
Schedule D, Part III	8		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodial			
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation service			
If "Yes," complete Schedule D, Part IV	9		X
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	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, III, II	X, or X,		
as applicable.			
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schell	dule D,		
Part VI	11a		X
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its tot	tal		
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its to			
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reporte			
Part X, line 16? If "Yes," complete Schedule D, Part IX			Х
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			Х
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresse			
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		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	Х	
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			X
	١		X
 b Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, bus 		\vdash	
investment, and program service activities outside the United States, or aggregate foreign investments valued at \$10			
	·		X
or more? If "Yes," complete Schedule F, Parts I and IV			1
	· I		x
foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
			v
or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV			X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	I		- v
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		-	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,		17	
1c and 8a? If "Yes," complete Schedule G, Part II	<u>18</u>	X	-
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	l l		
complete Schedule G, Part III			X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		-	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u> </u>	<u> </u>
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	X	

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Form **990** (2022)

Form 990 (2022) FOUNDATION FOR VAN 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		_X_
	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? If "Yes," complete			
	Schedule J	23		<u> </u>
	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			v
	Schedule K. If "No," go to line 25a	24a		_X_
	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	24c		
	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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
	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		X
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? If "Yes," complete Schedule L, Part II	26		_X_
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			l
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
	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):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? f	00-		Х
	"Yes," complete Schedule L, Part IV	28a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
	"Yes," complete Schedule L, Part IV	28c		Х
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
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? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
	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		<u> </u>
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			37
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
	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)2. If "Yes." complete School to B. Bort V. line 2.	35b		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
	If "Yes," complete Schedule R, Part V, line 2	36		Х
	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				
	Check if Schedule O contains a response or note to any line in this Part V			للم
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 12			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4.		
	12-13-22	1c Form	990	(2022)

FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h X Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). **5a** 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? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a 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? Х 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). X 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 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 d 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? 7e 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 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 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: 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 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state?

Note: See the instructions for additional information the organization must report on Schedule O.

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 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?

If "Yes," see the instructions and file Form 4720, Schedule N.

Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.

Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069

Form 990 (2022)

13a

14a

17

Х

X

Page 6

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 Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 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. 22 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 6 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 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? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х 15b Other officers or key employees of the organization 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? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE 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 __ Another's website Own 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 the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records JENNY THOMPSON - 360-313-4730

Form **990** (2022)

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BOX 6039, VANCOUVER,

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.

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

- 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.

(A)	(B)	Jiga	ıııza		C)	ipci	isati	(D)	(E)	(F)
Name and title	Average	(do		Pos	ition) than	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week (list any						<u> </u>	from the	from related organizations	other compensation
	hours for	trustee or director				pa:		organization	(W-2/1099-MISC/	from the
	related	stee o	rustee		a.	oensat		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al tru	onal t		ploye	ee ee		1099-NEC)		and related
	below line)	Individual 1	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JENNY THOMPSON	40.00	_		0	×	1 0				
EXECUTIVE DIRECTOR				х				82,853.	0.	4,261.
(2) AMY DAVIS	3.00									-
PRESIDENT		Х		Х				0.	0.	0.
(3) JEFF FISHER	3.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(4) CHRISTOPHER MAGANA	3.00									
TREASURER		Х		Х				0.	0.	0.
(5) SUE SIMON	3.00								_	_
SECRETARY		Х		Х				0.	0.	0.
(6) CINDY LUCKMAN	1.00								_	_
BOARD MEMBER		Х						0.	0.	0.
(7) SARA ELKINS	1.00								_	_
BOARD MEMBER		Х						0.	0.	0.
(8) PATRICK ADIGWEME	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) MICHAEL FLOREA	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) ILEANA BEMBENEK	1.00									
BOARD MEMBER		Х						0.	0.	0.
(11) SHANDA HALUAPO	2.00									
BOARD MEMBER	1 00	Х						0.	0.	0.
(12) RYAN HART	1.00								•	
BOARD MEMBER	1 00	Х					-	0.	0.	0.
(13) TREVOR HAYWARD	1.00								•	_
BOARD MEMBER	1 00	Х					_	0.	0.	0.
(14) SPENCER OIEN	1.00	,,								
BOARD MEMBER	1 50	Х					_	0.	0.	0.
(15) JOY JOHNSON	1.50	٠,								
BOARD MEMBER	1 00	Х	\vdash		_	-	\vdash	0.	0.	0.
(16) DANETTE LACHAPELLE BOARD MEMBER	1.00	v							_	
	1 50	Х	\vdash		_	\vdash	\vdash	0.	0.	0.
(17) DAN MEDAK BOARD MEMBER	1.50	х						0.	0.	0.
232007 12-13-22	1	Λ		l	<u> </u>		<u> </u>	<u> </u>	U •	Form 990 (2022)

232007 12-13-22

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Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	Hiç	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(C				(D)	(E)			(F)
Name and title	Average	(do		Positheck m			one	Reportable	Reportable		Es	timated
	hours per	box	, unle	ss pers	son is	s both	n an	compensation	compensation	1	l .	nount of
	week	_	cer ar	la a dir	ecto	rrus	lee)	from from relat			other	
	(list any hours for	director						the	organizations		l	pensation
	related	or di	ee			sated		organization	(W-2/1099-MIS(/ن	l	om the
	organizations	nstee	trus		99	ubeu		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		ı ~	anization d related
	below	dual t	rtiona		nploy	st cor	<u></u>	1			l	anizations
	line)	Individual trustee or	Institutional trustee	Offlicer	Key employee	Highest compensated employee	Former					
(18) FELISCIANA PERALTA	2.00											
BOARD MEMBER		Х						0.		0.		0.
(19) AMY REEVES	1.50											
BOARD MEMBER		Х						0.		0.		0.
(20) SYLVIA TRUJILLO	1.50											
BOARD MEMBER		Х						0.		0.		0.
(21) KELLY USSELMAN	1.00											
BOARD MEMBER		Х						0.		0.		0.
(22) LORI WICK	1.00											
BOARD MEMBER	1 00	Х						0.		0.		0.
(23) RALPH WILLSON	1.00	. ,								^		0
BOARD MEMBER		Х						0.		0.		0.
		1										
		1										
1b Subtotal								82,853.		0.		<u>4,261.</u>
c Total from continuation sheets to Part VI	l, Section A							0.		0.		0.
d Total (add lines 1b and 1c)								82,853.		0.		<u>4,261.</u>
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable			
compensation from the organization												0
												Yes No
3 Did the organization list any former officer,		ee, k	еу е	emplo	oyee	e, or	hig	hest compensated emp	loyee on			37
line 1a? If "Yes," complete Schedule J for si											3	X
4 For any individual listed on line 1a, is the su	•		•					•	•			37
and related organizations greater than \$150											4	X
5 Did any person listed on line 1a receive or a					•			•	dual for services		_	Х
rendered to the organization? If "Yes." com Section B. Independent Contractors	plete Schedule	e J f	or st	ıch p	ers	on .					5	Λ.
Complete this table for your five highest con	mnensated inc	lene	nder	nt co	ntra	acto	re th	nat received more than \$	100 000 of comp	neat	tion fro	ım.
the organization. Report compensation for t										JiiJai	LIOIT II C	,,,,
(A)				· <u>.g</u> ····				(B)			(0	2)
Name and business	address	N	ONE	3				Description of s	ervices	С		nsation
							_					
2 Total number of independent contractors (in	ncluding but no	ot lir	nited	to t	hos	e lis	ted	above) who received mo	ore than			

Form **990** (2022)

\$100,000 of compensation from the organization

FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS 91-0971800 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Re venue excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1b **b** Membership dues c Fundraising events 235,391. 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 1,417,961 similar amounts not included above... 1f 84,990 Noncash contributions included in lines 1a-1f 1,653,352 h Total. Add lines 1a-1f **Business Code** 2 a Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 240,761. 240,761 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents 6b **b** Less: rental expenses ... c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 4,046,981. assets other than inventory 7a **b** Less: cost or other basis 4,393,098 Other Revenue and sales expenses c Gain or (loss) ______7c -346,117. -346,117. -346,117. d Net gain or (loss) 8 a Gross income from fundraising events(not including \$ 235,391. of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses 42,072. -42,072 -42,072. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10a and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a d All other revenue

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-147,428

1,505,924.

e Total. Add lines 11a-11d

Total revenue. See instructions

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 response or note to any line in this Part IX (C) Management and general expenses (D) Do not include amounts reported on lines 6b. Total expenses Program service expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 333,360. 333,360. and domestic governments. See Part IV, line 2 Grants and other assistance to domestic individuals. See Part IV. line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 133,887. 13,389. 40,166. 80,332. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)..... 222,787. 22,279. 66,836. 133,672. Other salaries and wages 7 Pension plan accruals and contributions (inclube 3,106. 311. 932 1,863. section 401(k) and 403(b) employer contributions) 4,933. 493. 1,480. 2,960. Other employee benefits 9 10 Payroll taxes Fees for services (nonemployees): Management Legal 15,532. 15,532. Accounting Lobbying Professional fundraising services. See Part IV, line 17 95,698. 95,698. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on \$ch O.) 7,015. 1,800. 5,215. 1,627.23<u>,602</u>. 2,340. 19,635. Advertising and promotion 12 7,792. 36,706. 21,426. 7,488. Office expenses 13 11,072. 215. 5,857 Information technology 14 15 Royalties 16 Occupancy 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24). If line 24e amount exceeds 10% of line 25, colum amount, list line 24e expenses on Schedule O.) 286,793. 286,793. SCHOOL FUNDING 281,737. BASIC NEEDS AND STUDENT 281,737. 153,795. <u>153</u>,795. FOUNDATION PROGRAMS 131,244. 131,244. d MENTORING, **ENGAGEMENT** e All other expenses 741,267. 1,240,548. 248,912. 251,807. Total functional expenses. Add lines 1 through 24 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a comblined educational campaign and fundraising solicitation.

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Check here

if following SOP 98-2 (ASC 958-720)

<u>Part</u>	: X	Balance Sheet	<u> </u>			
		Check if Schedule O contains a response or no	ote to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	18,392.	1	131,412	
	2	Savings and temporary cash investments		110,079.	2	85,027
	3	Pledges and grants receivable, net		254,296.	3	246,246
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current				
		trustee, key employee, creator or founder, sub	stantial contributor, or 35%			
		controlled entity or family member of any of the	ese persons		5	
	6	Loans and other receivables from other disqua	lified persons (as defined			
		under section 4958(f)(1)), and persons describe	ed in section 4958(c)(3)(B)		6	
ध	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
₹	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities	10,566,966.	11	11,596,059	
	12	Investments - other securities. See Part IV, line		12		
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must eq		10,949,733.	16	12,058,744
	17	Accounts payable and accrued expenses		120,716.	17	200,310
	18	Grants payable		18		
-	19	Deferred revenue			19	
- 1	20	Tax-exempt bond liabilities			20	
- 1	21	Escrow or custodial account liability. Complete			21	
Se :	22	Loans and other payables to any current or for				
≝		trustee, key employee, creator or founder, sub				
Liabilities		controlled entity or family member of any of the			22	
_ '	23	Secured mortgages and notes payable to unre			23	
	24	Unsecured notes and loans payable to unrelate			24	
3	25	Other liabilities (including federal income tax, p	•			
		parties, and other liabilities not included on line	, .			
				100 716	25	200 210
+	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, ch	eck here X	120,716.	26	200,310
ဖွ		and complete lines 27, 28, 32, and 33.	ieck nere 22			
ĕ ,	27	• • • • • • • • • • • • • • • • • • • •		4,306,458.	27	4,807,604
ala (27 28	Net assets without donor restrictions Net assets with donor restrictions		6,522,559.	28	7,050,830
[[20	Organizations that do not follow FASB ASC		0,322,333.	20	7,030,030
튎ㅣ		and complete lines 29 through 33.	936, Check here			
ے _ا ج	29	Capital stock or trust principal, or current fund	6		29	
ets :	29 30	Paid-in or capital surplus, or land, building, or			30	
4ss	31	Retained earnings, endowment, accumulated i			31	
پ	31 32	Total net assets or fund balances		10,829,017.	32	11,858,434
_	32 33	Total liabilities and net assets/fund balances		10,949,733.	33	12,058,744
	50	Total nabilities and flet assets/fully baldifices			-00	Form 990 (202)

Form **990** (2022)

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	1,50	5,92	24.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,74	1,20	67.		
3	Revenue less expenses. Subtract line 2 from line 1						
4	1						
5	Net unrealized gains (losses) on investments	5	1,26	4,70	<u>60.</u>		
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	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	11,85	8,43	34.		
Pai	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.					
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 reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	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	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain on School	edule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	\sqcup	_X_		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b				

Form **990** (2022)

SCHEDULE A

(Form 990)

Total

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.

Open to Public Inspection

Employer identification number

OMB No. 1545-0047

Name of the organization

FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS

91-0971800 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). 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 10 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 June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 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 Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No Yes above (see instructions))

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4014426.	1412799.	4737936.	1269868.	1653352.	13088381.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	117,660.	45,915.	8,640.	39,213.	40,461.	251,889.
4	Total. Add lines 1 through 3	4132086.	1458714.	4746576.	1309081.	1693813.	13340270.
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)						5539197.
6	Public support. Subtract line 5 from line 4.						7801073.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	4132086.	1458714.	4746576.	1309081.	1693813.	13340270.
	Gross income from interest,						
Ŭ	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	98,352.	97,358.	157 222.	403 080.	240 761.	996,773.
۵	Net income from unrelated business	30,3321	3173301	13, 72220	103,000	210 / 7 010	33077731
9							
	activities, whether or not the						
40	business is regularly carried on Other income. Do not include gain						
10	· ·						
	or loss from the sale of capital	546.					546.
44	assets (Explain in Part VI.)	340.					14337589.
	Total support. Add lines 7 through 10	-t- / it				12	<u>µ 4337307.</u>
	Gross receipts from related activities, First 5 years. If the Form 990 is for the	•	,	:			
13	•		, , ,	•		. , ,	
Sa	organization, check this box and storection C. Computation of Publi						
_	Public support percentage for 2022 (li			nolumn (fl)		14	54.41 %
	Public support percentage from 2021					15	54.41 %
	33 1/3% support test - 2022. If the c						
102							
L	stop here. The organization qualifies						
Ľ	33 1/3% support test - 2021. If the c						
47.	and stop here. The organization qual						
1/2	10% -facts-and-circumstances test	_					
	and if the organization meets the facts		•	-		· ·	
	meets the facts-and-circumstances te	-			-		
b	10% -facts-and-circumstances test	ū				•	10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu		•				
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	<u>a, 16b, 17a, or 17b</u>	, check this box ar		(Form 990) 2022

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.)

Se	ction A. Public Support	elow, please comp	olete i ait ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	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						
•	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(-,	(2) = 1 : 2	(-,	(,	(-/	1
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	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.)						<u> </u>
14	First 5 years. If the Form 990 is for the	ie organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organization	on,
<u></u>	check this box and stop here	a Command Da					
	ction C. Computation of Publi			. (6)		T I	
	Public support percentage for 2022 (I	, , , , , , , , , , , , , , , , , , , ,	• •	()		15	<u>%</u>
	Public support percentage from 2021 ction D. Computation of Inves					16	%
	•			ing 12 galuman (f)\		47	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from			on line 1/L and line			7 is not
198	a 33 1/3% support tests - 2022. If the more than 33 1/3%, check this box ar						
ŀ	33 1/3% support tests - 2021. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che		-	•		-	
20	Private foundation. If the organization	in did not check a	nox on line 14 19	a or 10h check th	us hox and see in	structions	1 1

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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

- 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.
- 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).
- **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.
- **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.
- 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.
- **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.
- **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.
- 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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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? If "Yes," provide detail in Part VI.
- 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).
- 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).
- 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.
- **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 **Part VI.**
- 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **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.)

1	
2	
3a	
3b	
3c	
4a	
40	
41	
4b	
4c	
5a	
5b	
5c	
6	
7	
8	
9a	
9b	
0-	
9c	
40	
10a	
106	
10b	

Yes No

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these activities but for the organization's involvement. 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b Schedule A (Form 990) 2022

За

1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally in	ntegra	ted Type III supporting organ	nization (see

Schedule A (Form 990) 2022

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Current Year

Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount

instructions)

Pai	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continued	d)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
_4	Amounts paid to acquire exempt-use assets			4	
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022		(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
<u>i</u>	Carryover from 2017 not applied (see instructions)				
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				

Schedule A (Form 990) 2022

and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2023. Add lines 3j

Part VI. See instructions.

and 4c.
 B Breakdown of line 7:
 a Excess from 2018
 b Excess from 2019
 c Excess from 2020
 d Excess from 2021
 e Excess from 2022

Schedule B

(Form 990)

Schedule of Contributors

Attach to Form 990 or Form 990-PF.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

	FOU	NDATIO	ON FOR VA	NCOUVER	PUBLIC	SCHOO	LS		91-09	71800	
Organization	type (check one)):									
Filers of:	S	Section:									
Form 990 or 9	990-EZ	X 501(c))(3) (enter nu	mber) organiza	tion						
		4947(a)(1) nonexempt	charitable trust	not treated	as a private	foundation				
		527 p	olitical organizati	ion							
Form 990-PF		501(c)(3) exempt private foundation									
		4947(a)(1) nonexempt	charitable trust	treated as a	private foun	dation				
		501(c))(3) taxable priva	te foundation							
	organization is co section 501(c)(7),					eneral Rule	and a Speci	ial Rule. S	ee instruct	ions.	
		(-), ()	9								
General Rule											
	an organization fil erty) from any on										or
Special Rules	S										
secti contr	an organization d ions 509(a)(1) and ributor, during th) Form 990-EZ, lir	d 170(b)(1)(e year, tota	A)(vi), that check Il contributions o	ed Schedule A of the greater of	(Form 990), F	Part II, line 1	3, 16a, or 16	Sb, and th	at received	from any one	
conti litera	an organization d ributor, during th ary, or educationa " in column (b) in	e year, tota al purposes	Il contributions o , or for the preve	of more than \$1, ention of cruelty	,000 exclusive to children o	ely for religio	ous, charitab	ole, scienti	ific,		
year, is ch purp	an organization d , contributions ex ecked, enter here lose. Don't complious, charitable, e	cclusively for e the total of lete any of	or religious, chari contributions tha the parts unless	table, etc., purp t were received the General R	ooses, but no I during the ye t ule applies to	such contri ear for an e o this organi	butions total <i>xclusively</i> re zation becau	lled more t eligious, ch use it rece	than \$1,00 naritable, e eived <i>none</i>	0. If this box tc.,	the
answer "No" o	organization that on Part IV, line 2,	of its Form	990; or check th	ne box on line H	•			•			

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Pag

Name of organization Employer identification number

FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS

91-0971800

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>125,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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Name of organization Employer identification number

FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS

91-0971800

	ATION FOR VANCOUVER PUBLIC SCHOOLS		-0971000
Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 _ _ _	
		*	

Page 4

Name of organization **Employer identification number** FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS 91-0971800 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Schedule B (Form 990) (2022)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

Name of the organization

FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS

Employer identification number 91-0971800

Par	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be us	sed only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose co	onferring
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of a	a historically important land area
	Protection of natural habitat	Preservation of a	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the o	organization during the tax
	year		
4	Number of states where property subject to conservation eas	<u> </u>	
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and enforcing conse	rvation easements during the year
7	Amount of expanses incurred in monitoring inspecting hand	lling of violations, and enforcing concentration	on accoments during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	aling of violations, and emorcing conservation	on easements during the year
8	Does each conservation easement reported on line 2(d) above	o satisfy the requirements of section 170(h)	(4)(B)(i)
Ü			
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and evnense st	
Ŭ	balance sheet, and include, if applicable, the text of the footr	•	
	organization's accounting for conservation easements.	ioto to the organization o inhaholal statemen	no that docombos the
Par	rt III Organizations Maintaining Collections of	f Art, Historical Treasures, or Oth	er 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 95	8, not to report in its revenue statement and	d balance sheet works
	of art, historical treasures, or other similar assets held for put	olic exhibition, education, or research in furt	herance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these items.	·
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and ba	llance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	rance of public service,
	provide the following amounts relating to these items:	•	•
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$ <u></u>
			•
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2022

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

Sche Pa r				BLIC SCHOOL asures, or Othe	ւՏ r Simila	91-09 r Assets	71800 (contin	D P	age 2
3	Using the organization's acquisition, accession	n, and other records	s, check any of the f	ollowing that make s	ignificant ι	use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or excl	hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's exe	mpt purpo	se in Part	XIII.		
5	During the year, did the organization solicit or		•	*	r assets		7	_	_
	to be sold to raise funds rather than to be ma						Yes		No
Par	Escrow and Custodial Arrang		ete if the organization	n answered "Yes" or	n Form 990), Part IV, I	ine 9, or		
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodia		-				٦.,		٦
_	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	lowing table:				Amoun	+	
	De alicado a habana a				4.		Amoun		
	Beginning balance								
	Additions during the year								
e •	Distributions during the year				<u>1e</u>				
22	Ending balance						Yes		No
	If "Yes," explain the arrangement in Part XIII.						_ 1 <i>e</i> s		
Par									
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	years back	(e) Four	r years	back
1a	Beginning of year balance	1,862,660.	2,196,395.	1,970,364.		36,129.		,870,	
b	Contributions	, ,		, ,	,				
c	Net investment earnings, gains, and losses	176,907.	-297,474.	559,897.	-	10,660.		177,	072.
d	Grants or scholarships	·	·	,					
е	Other expenditures for facilities								
	and programs	35,453.	36,261.	333,866.		55,105.		11,	931.
f	Administrative expenses								
g	End of year balance	2,004,114.	1,862,660.	2,196,395.	1,9	70,364.	2	,036,	129.
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	89.1100	_%						
b	Permanent endowment 6.5500	%							
С	Term endowment 4.3400 9	6							
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.							
За	Are there endowment funds not in the posses	sion of the organiza	tion that are held an	d administered for t	ne				
	organization by:							Yes	No
	(i) Unrelated organizations						3a(i)		X
	(ii) Related organizations						3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organizat	ions listed as require	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the		wment funds.						
Par	t VI Land, Buildings, and Equipme		D . W. II. 44 O	5 000 D 11	40				
	Complete if the organization answered		· · · · · · · · · · · · · · · · · · ·	i					
	Description of property	(a) Cost or of	, , , , , ,	1 ' '	Accumulate	ed	(d) Boo	k valu	е
	Land	basis (investm	nent) basis ((Other) de	epreciation				
	Land		+						
	Buildings								
	Leasehold improvements					- -			
	Equipment					- -			
	Other Add lines 1a through 1e (Column (d) must on		V column (D) line 10	<u> </u>					0.

Schedule D (Form 990) 2022

232053 09-01-22

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

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.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 91-0971800 FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations е Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events С g d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

232081 10-27-22

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990) 2022

Schedule G (Form 990) 2022 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. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events NONE (add col. (a) through LUNCHEON col. (c)) (event type) (event type) (total number) 235,391. 235,391. Gross receipts 235,391 235,391. 2 Less: Contributions Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 8,160. 8,160. 6 Rent/facility costs 11,848. 11,848. 7 Food and beverages 1,100. 1,100. 8 Entertainment 20,964. 20,964. Other direct expenses 42,072. 10 Direct expense summary. Add lines 4 through 9 in column (d) -42,072Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Expenses Noncash prizes Direct Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

Schedule G (Form 990) 2022

b If "Yes," explain:

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Sch	edule G (Form 990) 2022 FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS 91-0	<u> 1971800</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
12	Indicate the percentage of gaming activity conducted in:		
		13a	%
	The organization's facility	13b	
	An outside facility	130	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	L Yes	No
b	olf "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
	of gaming revenue retained by the third party \$		
С	: If "Yes," enter name and address of the third party:		
_	······································		
	Name		
	Address		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
47	Mandatan diatributiona		
	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		п. .
	retain the state gaming license?	Yes	∟ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III, lines 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
		· · · · · ·	

Schedule G	(Form 990) Supplemental Inform	FOUNDATION	FOR	VANCOUVER	PUBLIC	SCHOOLS	91-0971800	Page 4
Part IV	Supplemental Infor	mation (continued)						
_								

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

2022 Open to Public

Inspection

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

			01.00011011006				
Name of the organization FOITNDATTON FOR VANCOITVER	N FOR VAN	COUVER PUBLIC	STOOHUS UI				Employer identification number 91-0971800
Part I General Information on Grants and Assistance	nd Assistance	ı					
1 Does the organization maintain records to substantiate the amount of	to substantiate the		or assistance, the g	rantees' eligibility	for the grants or assis	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	'
	stance?						X Yes No
S	ocedures for monit	oring the use of grant f	funds in the United	States.			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Con recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	Domestic Organiz \$5,000. Part II can		Governments. Contains space is neede	omplete if the orga d.	inization answered "Y	Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any ed if additional space is needed.	IV, line 21, for any
1 (a) Name and address of organization or government	(p) 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
COUNCIL FOR THE HOMELESS 2500 MAIN ST VANCOUVER, WA 98660	91-2001828	501(C)(3)	.000,38	.0			TO HELP WITH HOUSING ASSISTANCE FOR STUDENTS/FAMILIES IN THE SCHOOL DISTRICT
VANCOUVER PUBLIC SCHOOL DISTRICT 2901 FALK RD VANCOUVER, WA 98661	91-6001540	170(C)(1)	.48,735.	137,900.	FMV	VARIOUS DONATED GOODS	TO ASSIST SCHOOLS AND FAMILIES IN VANCOUVER SCHOOL DISTRICT
	nd government org	ions	listed in the line 1 table				
3 Enter total number of other organizations listed in the line 1 table	s listed in the line 1	table					Schodule I (Form 990) 2022
	י מכני נוום וווכני מכני						סטווכחחום ו (ו סוווי סיטו דייד)

232101 10-31-22

Page 2

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	quired in Part I, line	e 2; Part III, column	(b); and any other ad	ditional information.	
232102 10-31-22					Schedule I (Form 990) 2022

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

Dai	FOUNDATION FO	JR VAN	COUVER PUI	STIC SCHOOLS	91-0	9/1	000	
Pai	t I Types of Property				1			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1	(d) Method of de noncash contribu	etermin	_	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	Х		53,605	• FMV			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
••	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
13								
14	Historic structures Qualified conservation contribution - Other							
15	Real estate - Residential							
16								
	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles	X	57	31,385	EM77			
19	Food inventory	Λ	37	31,303	• I. M.A.			
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		,					
	for which the organization completed Form 828	33, Part V, D	onee Acknowledge	ement 29				
							Yes	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted in Part I, lines 1 thro	ugh 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be use	d for			
	exempt purposes for the entire holding period?)				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	quires the review o	of any nonstandard contrib	utions?	31	X	
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncas	າ			
	contributions?		•			32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is ch	ecked,			
	describe in Part II.	()	71 1 1 7	() 12 211	,			

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

Schedule M (Form 990) 2022

Schedule M	I (Form 990) 2022 FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS 91-0971800 Page 2
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.
	this part for any additional information.
SCHEDU	LE M, PART I, COLUMN (B):
ВСПЕВО	III II, IIIII I, CODOIN (D).
NUMBER	OF CONTRIBUTIONS
-	

3336____1

232142 09-09-22

SCHEDULE 0 (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 Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS

Employer identification number 91-0971800

FORM 990, ITEM C, DOING BUSINESS AS:	
FOUNDATION FOR VANCOUVER SCHOOLS	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE 990 IS REVIEWED BY THE BOARD AND FINANCE COMMITTEE WITH PROPOSED	
ADJUSTING JOURNAL ENTRIES TO THE FOUNDATION'S BOOK FROM THE CPA FIRM	
PREPARING THE 990. THE RETURN IS REVIEWED BY THE PRESIDENT AND TREASURER	
AND SIGNED AFTER CONCURRING WITH THE PROPOSED ADJUSTMENTS INCLUDED ON THE	
FORM 990.	
FORM 990, PART VI, SECTION B, LINE 12C:	
THE ORGANIZATION ANNUALLY DISCUSSES THE CONFLICT OF INTEREST POLICY AND HAS	
BOARD MEMBERS SIGN A DISCLOSURE FORM.	
FORM 990, PART VI, SECTION B, LINE 15:	
BOARD SETS EXECUTIVE DIRECTOR COMPENSATION ON ANALYSIS OF COMPARABLE PAY,	
SPECIFIC DUTIES, AND TIME REQUIREMENTS. THERE ARE NO OTHER KEY EMPLOYEES OF	
THE ORGANIZATION.	
FORM 990, PART VI, SECTION C, LINE 18:	
UPON REQUEST	
FORM 990, PART VI, SECTION C, LINE 19:	
THESE DOCUMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC.	
FORM 990 PART XII LINE 2C.	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page 2
Name of the organization FOUNDATION FOR VANCOUVER PUBLIC SCHOOLS	Employer identification number 91-0971800
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR	