Form	99	0

# **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 2022

Internal Revenue Service       Go to www.irs.gov/Form990 for instructions and the latest information.         A       For the 2022 calendar year, or tax year beginning       , 2022, and ending       , 2         B       Check if applicable:       C       D Employer identified         Address change       Schoolhouse of Wonder       56-16704       56-16704         Name change       Distange NC 27715       Telephone number	
Address change Name change Nam	ication number
Name change 3520 Kangaroo Drive #61777 E Telephone number	
$\overline{\mathbf{N}}$	172
Durban NC 2771E	er
Initial return Durham, NC 27715 919-477-2	2116
Final return/terminated	
Amended return G Gross receipts \$	1,104,583.
Application pending F Name and address of principal officer: Robin Murchison	ordinates? Yes X No
Same As C Above H(b) Are all subordinates included? If "No," attach a list. See instru	? Yes No
I Tax-exempt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527	ructions.
J Website: www.schoolhouseofwonder.org H(c) Group exemption number	
	gal domicile: NC
Part I Summary	
1 Briefly describe the organization's mission or most significant activities: Schoolhouse of Wonder creat	ites kind,
aurious and confident kids through nature-based outdoor adventures	
Currous, and confidence kids chrough nature-based outdoor adventures.     2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net asse     3 Number of voting members of the governing body (Part VI, line 1a)	
<b>8 2</b> Check this box if the organization discontinued its operations or disposed of more than 25% of its net asse	ets.
3   Number of voting members of the governing body (Part VI, line 1a)   3	7
4 Number of independent voting members of the governing body (Part VI, line 1b)	7
<ul> <li>A Number of independent voting members of the governing body (Part VI, line 1b)</li></ul>	69
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	8
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	0.
Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1b) 255,017	24,542.
9       Program service revenue (Part VIII, line 2g)       233,017.         9       Program service revenue (Part VIII, line 2g)       539,100.         10       Investment income (Part VIII, column (A), lines 3, 4, and 7d)       1,729.         11       Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)       628	1,059,402.
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,921.
4 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9,844.
12       Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)       796, 474.	1,097,709.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3).	
14 Benefits paid to or for members (Part IX, column (A), line 4)	
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 459, 516.	803,084.
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>17</b> Oll	
b Total fundraising expenses (Part IX, column (D), line 25) 1,469.	
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e).         126, 343.	174,094.
18       Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	977,178.
19         Revenue less expenses. Subtract line 18 from line 12         210,615.	120,531.
	End of Year
हु <b>20</b> Total assets (Part X, line 16)	635,303.
<b>21</b> Total liabilities (Part X, line 26)	228,397.
Beginning of Current Year20Total assets (Part X, line 16)21Total liabilities (Part X, line 26)22Net assets or fund balances. Subtract line 21 from line 20	406,906.
Part II Signature Block	400,000.
	f it is true correct and
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
Walt	
Sign Signature of Pricer Date	
Here Wendy Tonker CEO	
Type or print name and title	
Print/Type preparer's name Preparer's signature Date Check if PT	PTIN
Paid Mig Murphy Sistrom Mig Murphy Sistrom Self-employed P	200480286
Preparer Firm's name MIG MURPHY SISTROM, CPA, PC	
	8021147
DURHAM, NC 27707 Phone no. (919)	
May the IRS discuss this return with the preparer shown above? See instructions	X Yes No
BAA For Paperwork Reduction Act Notice, see the separate instructions. TEEA0101L 09/01/22	Form <b>990</b> (2022)

Form	n 990 (2022) Schoolhouse of Wonder	56-1670472	Page <b>2</b>
Par	Statement of Program Service Accomplishments           Check if Schedule O contains a response or note to any line in this Part III		
1		<u></u>	
•	Schoolhouse of Wonder creates kind, curious, and confident kids	through nature-h	based
	outdoor adventures.		
2	Did the organization undertake any significant program services during the year which were not listed on the p	rior	
-	Form 990 or 990-EZ?		X No
	If "Yes," describe these new services on Schedule O.	_	<u> </u>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program so	ervices? Yes	X No
4	If "Yes," describe these changes on Schedule O.	vices as measured by ex	noncoc
-	Describe the organization's program service accomplishments for each of its three largest program ser Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocatio and revenue, if any, for each program service reported.	ns to others, the total exp	penses,
4a			8,845.)
	Camps: Award-winning, year-round outdoor day camps with areas of		
	nature exploration and naturalist skills, games, problem-solving curious, and confident kids. 3,434 camp seats were filled betwee		
	2022.		
4b	Code: ) (Expenses \$ 35,663. including grants of \$ )	(Revenue \$ 55	5,074.)
	Leadership Development: Opportunities for 13-17 year olds to dis	·	<u>, , , , , , , , , , , , , , , , , , , </u>
	leadership style and practice necessary leadership skills in our		
	outdoor day camps. Skill building occurs through the creation of goals, personal development plans, real time feedback, and a week		
	with senior staff to assess individual progress. During 2022, we		
	training experiences for 13-15 year olds, and 26 employment oppo		
	year_olds		
4c	: (Code:) (Expenses \$ including grants of \$)	Revenue ک	)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$		)
4e	e Total program service expenses 813, 994.	Form	990 (2022)

Form 990 (2022) Schoolhouse of Wonder

Par	t IV Checklist of Required Schedules		0	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes X	No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Х	
	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		Х
	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	12a		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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> . See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		Х
BAA	TEEA0103L 09/01/22	Form	99 <b>0</b>	(2022)

Form 990 (2022) Schoolhouse of Wonder

Part IV Checklist of Required Schedules (continued)

22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>	27		Х
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		Х
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a		Yes	No
	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?	1c	Х	
BAA	TEEA0104L 09/01/22	Form	<b>990</b> (	2022)

Yes No Г

56-1670472 Page 4

F 000 (0000)	<b>a</b> 1	 c	-	

		670472	F	Page 5
Part	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		1	
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return <b>2a</b>	69		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	-		Х
	<b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule Q</i>			
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
5-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5.		Х
	<ul> <li>Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> </ul>			X
	: If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	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?	on		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	_		X
h	services provided to the payor?			A
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?			Х
	I 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?		-	X X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	X
5	I If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	I If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?			
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.).			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year <b>12b</b>			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		
d	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	• Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	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?			X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that w result in the imposition of an excise tax under section 4951, 4952, or 4953?		1	
	If "Yes," complete Form 6069.			

Pai	<b>t VI</b> Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b b a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char Schedule O. See instructions.	elow nges	, and on	d for
	Check if Schedule O contains a response or note to any line in this Part VI.			. X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year       1a       7         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.       1a       7			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents	•		
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		х
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		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venu	e Co	de.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
C	: Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was doneSee. Schedule O.	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official See. Schedule .0	15a	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Х
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 arrangements?	166		
Sac	organization's exempt status with respect to such arrangements?	16b		I
<u>3ec</u> 17				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50 available for public inspection. Indicate how you made these available. Check all that apply.	1(c)(3	)s on	ly)
	X     Own website     Another's website     X     Upon request     Other (explain on Schedule O)	h.1		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availate the public during the tax year. See Schedule O	die to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	Wendy Tonker 3520 Kangaroo Drive #61777 Durham NC 27715 919-477-2116			

Form 990 (2022) Schoolhouse of Wonder

56-1670472

Page 6

Form 990 (2022) Schoolhouse of Wonder	56-1670472	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Independent Contractors	Compensated Employe	es, and
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 Compensa	ted Employees	
<b>1a</b> Complete this table for all persons required to be listed. Report compensation for the calendar year ending organization's tax year.		

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(C)						
(A) Name and title	(B) Average hours per	thar is	n one b s both a dire	oox, an o ctor/	unles	,	on	<b>(D)</b> Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Wendy Tonker CEO	$\frac{40}{0}$			х				74,220.	0.	7,841.
(2) Renee Strnad Treasurer	2	х		Х				0.	0.	0.
(3) Jen Costanza Secretary	<u>2</u> 0	X		X				0.	0.	0.
(4) Daniel Paul Mosca Fmr Board Chair	<u>2</u> 0	Х						0.	0.	0.
(5) Robin Murchison Board Chair	<u>2</u> 0	х		Х				0.	0.	0.
(6) Emily Wallace Board Member	<u>2</u> 0	х						0.	0.	0.
(7) Mickey Fanney Board Member	<u>- 2</u> 0	х						0.	0.	0.
(8) Erin Selzler Board Member	<u>- 2</u> 0	Х						0.	0.	0.
(9) John Offenberg Board Member	<u>2</u> 0	Х						0.	0.	0.
(10)										
(11)										
(12)										
(13)										
ВАА	TEEA0	107L	09/01/	122						Form <b>990</b> (2022)

#### Form 990 (2022) Schoolhouse of Wonder

56-1670472

Page 8

Par	t VII Section A. Officers, Directors, Tru	stees, I	Key	Emp	plo	yee	es, a	nd	l Highest Com	pensated Empl	oyees (continued)
		(B)			(C)						
	<b>(A)</b> Name and title	Average hours per	box.	unles	s per	rson i	than o s both r/truste	an	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amount
		week (list any							the organization (W-2/1099-	related organizations (W-2/1099-	of other compensation from
		for related	director .	stituti	Officer	Key employee	ghest ploye	Former	MISC/1099-NEC)	MISC/1099-NEC)	the organization and related organizations
		organiza - tions	ual tri tor	onali		ploye	e com				organizationio
		below dotted line)	ustee	Institutional trustee		ð	Highest compensated employee				
		line)		õ			rted				
(15)											
(16)											
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
1b	Subtotal								74,220.	0.	7,841.
с	Total from continuation sheets to Part VII, Section	on A							0.	0.	0.
_	Total (add lines 1b and 1c)								74,220.	0.	7,841.
2	Total number of individuals (including but not limited from the organization 0	to those li	isted a	above	e) w	ho r	eceiv	ed	more than \$100,00	U of reportable comp	
3	Did the organization list any former officer, direct	or truste		v em	nlov		or h	iah	est compensated	employee	Yes No
•	on line 1a? If "Yes, "complete Schedule J for such										. <b>3</b> X
4	For any individual listed on line 1a, is the sum of the organization and related organizations greater such individual.	r than \$1!	50,00	0? /:	f "Y	′es,"	' com	ple	ete Schedule J for		4 X
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? <i>If "Yes</i>										
Sec	ion B. Independent Contractors										
1	Complete this table for your five highest compens compensation from the organization. Report compens	ated inde sation for	epend the ca	ent d alend	cont ar y	tract ear e	ors tl endin	hat Ig w	received more th vith or within the or	an \$100,000 of ganization's tax year	
	(A) Name and business addre							Ű	<b>(B)</b> Description of	,	(C) Compensation
	Total number of independent contractors (induction by	ut not limi	itod to	that		ctad	ahav	(A) ·	who received mare	than	
2	Total number of independent contractors (including be \$100,000 of compensation from the organization	ut not iimi 0		0.0105		รเซน	auuv	C) \		uidH	

## Form 990 (2022) Schoolhouse of Wonder

Part VIII Statement of Revenue

Page 9

			(A)	(B)	(C)	(D)
			<b>(A)</b> Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from under section 512-514
ated campaigns	1a			Tevenue		512 514
ership dues	1b					
aising events	1c					
ed organizations	1d					
nent grants (contributions)	1e					
r contributions, gifts, grants, and						
amounts not included above	1f	24,542.				
h contributions included in -1f	1g					
Add lines 1a-1f		•	24,542.			
		Business Code				
s <u>, other program fee</u> s	<u> </u>	611600	1,077,639.	1,077,639.		
<u>scholarships</u> awarded	<u> </u>	611600	-18,237.	-18,237.		
ner program service revenu						
Add lines 2a-2f			1,059,402.			
ment income (including divid similar amounts)			1 101			A 10
e from investment of tax-e			4,104.			4,10
ties		•				
(i) R		(ii) Personal				
ents						
ental expenses 6b						
ncome or (loss) 6c						
ntal income or (loss)						
mount from (i) Sect	urities	(ii) Other				
assets 70						
an inventory 7a						
es expenses <b>7b</b>		183.				
(loss) 7c		-183.				
ain or (loss)	· · · · <u>· ·</u>		-183.			-18
ncome from fundraising events						
luding \$						
ibutions reported on line 1c).						
t IV, line 18	8					
direct expenses	8					
come or (loss) from fundra	using	events				
ncome from gaming activities. t IV, line 19	9					
direct expenses	9					
come or (loss) from gamin		~				
, , <sub>,</sub> <sub>,</sub>						
ales of inventory, less	10	<b>a</b> 16,280.				
cost of goods sold		<b>b</b> 6,691.				
-	of inve		9.589	9.589		
		Business Code				
<u>dit Card Rewards</u>		900099	255.			25
ner revenue						
			255			
<u>dit</u> ner	<u>Card Rewards</u>	<u>Card Rewards</u>	<u>Card Rewards</u> 900099	Business Code         70000	Business Code         5/0001         5/0001	Business Code         5/0001         5/0001

6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0.	0.	0.	<u> </u>
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	621,073.	578,978.	41,392.	703.
9	Other employee benefits	37,879.	31,373.	6,481.	25.
10	Payroll taxes	52,453.	47,745.	4,614.	94.
11	Fees for services (nonemployees):	0271001	1,,,10,	1/0111	<u> </u>
а	Management				
	Legal	59.		59.	
	Accounting.	45,298.		45,298.	
	Lobbying.	10/2001		1072001	
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	304.		304.	
g	Other. (If line 11g amount exceeds 10% of line 25, column		C 0.C7		
10	(A), amount, list line 11g expenses on Schedule 0.) Advertising and promotion	6,267.	6,267.	497.	
12	Office expenses	<u>15,980.</u> 23,428.	<u>15,477.</u> 5,247.	18,177.	<u> </u>
13	Information technology.	23,428.	19,088.	1,183.	<u> </u>
15	Royalties.	20,205.	19,000.	1,103.	14.
15	Occupancy.	6,744.	6,304.	435.	5.
17	Travel	60.	60.	433.	<u> </u>
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings	5,044.	4,579.	465.	
20	Interest	-196.		-196.	
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization	3,057.	3,119.	-65.	3.
23	Insurance	25,525.	9,325.	16,192.	8.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Program Supplies	9,395.	9,133.	262.	
b	Equipment Rental & Repair	5,451.	5,451.		
С		2,626.	2,626.		
d	<u>Staff Training &amp; Development</u>	1,693.		1,693.	
e	All other expenses.	3,074.	474.	2,600.	
25	Total functional expenses. Add lines 1 through 24e	977,178.	813,994.	161,715.	1,469.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
BAA		TEEA0110L 09/01/2	2		Form <b>990</b> (2022)

#### Form 990 (2022) Schoolhouse of Wonder

Part IX Statement of Functional Expenses

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21..... Grants and other assistance to domestic individuals. See Part IV, line 22.....

Grants and other assistance to foreign

Compensation not included above to

organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16.

Benefits paid to or for members ..... Compensation of current officers, directors,

trustees, and key employees .....

1

2

3

4

5

6

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

(A) Total expenses

91,679.

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

(D)

Fundraising

expenses

607.

(C)

Management and

general expenses

22,324

(B)

Program service

ĕxpenses

68,748.

Page 11

Form 990 (2022) Schoolhouse of Wonder 56-1670472 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X ..... (A) Beginning of year (B) End of year Cash – non-interest-bearing..... 759,223 1 2,123. 1 2 Savings and temporary cash investments. 2 559,493. 4,083. Pledges and grants receivable, net. 3 3 2,500. Accounts receivable, net ..... 4 4 87,499 5,082. Loans and other receivables from any current or former officer, director, 5 controlled entity or family member of any of these persons ...... 5 Loans and other receivables from other disqualified persons (as defined under 6 section 4958(f)(1)), and persons described in section 4958(c)(3)(B) ..... 6 7 Notes and loans receivable, net. 7 Inventories for sale or use..... 8 8 6,507 7,464. Assets Prepaid expenses and deferred charges..... 9 9 8,956 21,714. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D ..... 10a 10a 25,390 **b** Less: accumulated depreciation. 10b 20,338. 10c 756. 5,052. Investments – publicly traded securities. 32.722. 11 27,722. 11 Investments – other securities. See Part IV, line 11..... 12 12 13 Investments – program-related. See Part IV, line 11..... 13 14 Intangible assets..... 3,300 14 1,650. Other assets. See Part IV, line 11..... 15 15 3,898 2,503. 16 Total assets. Add lines 1 through 15 (must equal line 33)..... 906,944. 635,303. 16 17 Accounts payable and accrued expenses..... 33,753. 17 52,123. 18 18 Grants payable ..... 19 Deferred revenue 19 31,995. 414,395. 20 Tax-exempt bond liabilities..... 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Liabilities 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons ..... 22 Secured mortgages and notes payable to unrelated third parties ..... 23 23 Unsecured notes and loans payable to unrelated third parties..... 24 24 166,976. 144,279. Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 26 Total liabilities. Add lines 17 through 25..... 615,124 26 228,397. Organizations that follow FASB ASC 958, check here Х Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions ..... 231,923. 27 369,879. 27 Net assets with donor restrictions..... 28 59,897. 28 37.027. Fund Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 5 29 Capital stock or trust principal, or current funds. 29 Net Assets Paid-in or capital surplus, or land, building, or equipment fund..... 30 30 Retained earnings, endowment, accumulated income, or other funds..... 31 31 32 Total net assets or fund balances..... 291,820. 32 406,906. Total liabilities and net assets/fund balances ..... 33 906,944. 33 635,303. BAA TEEA0111L 09/01/22 Form 990 (2022)

Form	990	(2022)	Schoolhouse of Wonder 56-1	L670472		Pag	ge <b>12</b>
Par	t XI	Reco	onciliation of Net Assets				
		Check	if Schedule O contains a response or note to any line in this Part XI.				
1	Tota	l revenue	e (must equal Part VIII, column (A), line 12)	1	1,09	97,7	09.
2	Tota	l expense	ses (must equal Part IX, column (A), line 25)	2	9'	77,1	78.
3	Reve	enue less	s expenses. Subtract line 2 from line 1	3	12	20,5	31.
4	Net a	assets or	r fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2	91,8	20.
5	Net ı	unrealize	ed gains (losses) on investments	5		-5,4	45.
6			vices and use of facilities	6			
7			expenses	7			
8		•	adjustments	8			
9		-	es in net assets or fund balances (explain on Schedule O)	9			0.
10			fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	10	40	06,9	06.
Par	t XII	Finar	ncial Statements and Reporting				
		Check	if Schedule O contains a response or note to any line in this Part XII				· 🗌
						Yes	No
1	Acco	ounting m	nethod used to prepare the Form 990: Cash X Accrual Other				
	lf the on S	organiza chedule	ation changed its method of accounting from a prior year or checked "Other," explain O.				
2a	Were	e the org	anization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	lf "Ye sepa	rate bas	ck a box below to indicate whether the financial statements for the year were compiled or reviewer sis, consolidated basis, or both:	d on a			
		Separa	ate basis Consolidated basis Both consolidated and separate basis				
b	Were	e the orga	anization's financial statements audited by an independent accountant?		2b		Х
	lf "Ye basis	s, consol	ck a box below to indicate whether the financial statements for the year were audited on a separat lidated basis, or both: ate basis Consolidated basis Both consolidated and separate basis	te			
С	lf "Ye revie	es" to line w, or co	e 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, ompilation of its financial statements and selection of an independent accountant?		2c		
	on S	chedule					
	Guid	ance, 2 (	of a federal award, was the organization required to undergo an audit or audits as set forth in the L C.F.R Part 200, Subpart F?		3a		Х
b			he organization undergo the required audit or audits? If the organization did not undergo the required aud plain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA			TEEA0112L 09/01/22		Form	<b>990</b> (	2022)

SCHEDULE A (Form 990)

Total

# Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

2022

OMB No. 1545-0047

Depart Interna	ment of the Treasury I Revenue Service	G	Go to www.irs.gov/Form990 for instructions and the latest information.				Inspection			
Name	of the organization	•					Employer identific	ation number		
Sch	oolhouse of						56-167047			
Par				organizations must				ctions.		
The c	-	•		For lines 1 through 12,		-	•			
1				hurches described in sec		(b)(1)(A)(	(i).			
2				ach Schedule E (Form						
3		•		ization described in se						
4			tion operated in conju	unction with a hospital of	describe	d in sec	ction 170(b)(1)(A)(iii). E	inter the hospital's		
_		name, city, and state:								
5	An organizat section 170(	ion operated for b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or university owned	or opera	ated by a	a governmental unit de	escribed in		
6	A federal, sta	ate, or local gov	ernment or governme	ntal unit described in s	section 1	1 <b>70(b)(</b> 1)	)(A)(∨).			
7	X An organization in section 17	on that normally i 0(b)(1)(A)(vi).(	receives a substantial p Complete Part II.)	part of its support from a	governm	nental un	it or from the general pu	blic described		
8	A community	trust described	in section 170(b)(1)(	A)(vi). (Complete Part	II.)					
9				ction 170(b)(1)(A)(ix) oper						
	,	r a non-land-gra	nt college of agriculture	e (see instructions). Ente	r the nar	ne, city,	and state of the college	or		
	university:									
10	from activitie investment ir	s related to its a ncome and unre	exempt functions, sub	nan 33-1/3% of its supp ject to certain exceptio e income (less section Part III.)	ns; and	(2) no n	nore than 33-1/3% of it	s support from gross		
11				ely to test for public safe	ety. See	section	n 509(a)(4).			
12	An organizat	ion organized a	nd operated exclusive	ly for the benefit of, to	perform	the fun	ctions of, or to carry ou	ut the purposes of one		
	or more publ	icly supported o	rganizations describe	d in section 509(a)(1) of upporting organization	or <b>sectio</b>	on 509(a	)(2). See section 509(a	a)(3). Check the box on		
а	Type I. A supp	orting organizati	on operated, supervise	d. or controlled by its su	oported o	organizat	ion(s), typically by giving	a the supported		
	organization(s	) the power to re	gularly appoint or elect	t a majority of the directo	rs or trus	stees of t	he supporting organizati	on. You must		
b		rt IV, Sections A		antrollad in composition	ith ite		ad averagination (a) by	having applyed as		
D	management	of the supporting te Part IV, Sect	organization vested in	ontrolled in connection the same persons that c	ontrol or	manage	the supported organiza	tion(s). <b>You</b>		
С	Type III function	onally integrated s) (see instructi	. A supporting organizations). You must com	tion operated in connectio plete Part IV, Sections	on with, a <b>A, D, an</b>	nd functi d E.	onally integrated with, its	supported		
d	functionally in	ntegrated. The c	organization generally	panization operated in co must satisfy a distribu Is <b>A and D, and Part V.</b>	tion regi	with its s uiremen	supported organization(s t and an attentiveness	) that is not requirement (see		
е	Check this bo	ox if the organiz	ation received a writte	en determination from t	the IRS	that it is	a Type I, Type II, Type	e III functionally		
	integrated, or	r Type III non-fu	nctionally integrated	supporting organizatior	۱.			-		
			n about the supported	d organization(s)						
	(i) Name of supported	-	(ii) EIN		(iv)	ls the	(v) Amount of monetary	(vi) Amount of other		
	()		()	(iii) Type of organization (described on lines 1-10 above (see instructions))	organiza	Is the tion listed governing	support (see instructions)	support (see instructions)		
					docu	ment?				
					Yes	No				
(A)										
<u>(ry</u>										
<u>(B)</u>										
(C)										
(D)										
(E)										
					1			1		

56-1670472

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

#### Section A. Public Support

	tion A. Public Support							
	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022		(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	74,860.	71,432.	195,035.	255,017.	24,54	2.	620,886.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					, i		0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge							0.
4	Total. Add lines 1 through 3	74,860.	71,432.	195,035.	255,017.	24,54	2.	620,886.
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)							15,266.
	Public support. Subtract line 5 from line 4							605,620.
Sec	tion B. Total Support							
	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022		<b>(f)</b> Total
7	Amounts from line 4	74,860.	71,432.	195,035.	255,017.	24,54	2.	620,886.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,398.	1,648.	574.	1,183.	4,104.		8,907.
9	Net income from unrelated business activities, whether or not the business is regularly carried on							0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI	1,831.				25	5.	2,086.
	Total support. Add lines 7 through 10							631,879.
12	Gross receipts from related activ	ities, etc. (see ins	tructions)			· · · · · · · · · · · · · · · · · · ·	12	3,649,346.
13	First 5 years. If the Form 990 is organization, check this box and	for the organizatio stop here	n's first, second,	third, fourth, or fi	fth tax year as a s	ection 501(c)	(3)	
	tion C. Computation of Pul							
	Public support percentage for 20	-					14	95.84 %
	Public support percentage from 2					L	15	94.23%
16a	<b>33-1/3% support test—2022.</b> If the and <b>stop here.</b> The organization							
b	<b>33-1/3% support test–2021.</b> If th and <b>stop here.</b> The organization							
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts-	meets the facts-ar	id-circumstances	test, check this b	ox and stop here	. Éxplain in P	°art ∖	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization r organization meets the facts-and	meets the facts-ar I-circumstances te	nd-circumstances st. The organizati	test, check this b on qualifies as a	ox and stop here publicly supported	. Explain in P I organization	Part \ 1	VI how the
18	Private foundation. If the organiz	zation did not chee	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see	; ins	tructions

Schedule A (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.)

#### Section A. Public Support Calendar year (or fiscal year beginning in) (c) 2020 (a) 2018 (b) 2019 (d) 2021 (e) 2022 (f) Total Gifts, grants, contributions, 1 and membership fees received. (Do not include any "unusual grants."). 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge ... 6 Total. Add lines 1 through 5... Amounts included on lines 1, 7a 2, and 3 received from disqualified persons ... **b** Amounts included on lines 2 and 3 received from other than disgualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year ..... c Add lines 7a and 7b ..... 8 Public support. (Subtract line 7c from line 6.). Section B. Total Support (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total Calendar year (or fiscal year beginning in) 9 Amounts from line 6..... 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 ... c Add lines 10a and 10b..... Net income from unrelated business 11 activities not included on line 10b. whether or not the business is regularly carried on. . . . . 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.)..... First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))..... 15 % 16 Public support percentage from 2021 Schedule A, Part III, line 15. ÷ 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) .... 17 % 18 Investment income percentage from 2021 Schedule A, Part III, line 17..... ÷ 18 19a 33-1/3% support tests-2022. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. **b** 33-1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .....

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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

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

**Part IV** Supporting Organizations (continued)

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
<b>b</b> A family member of a person described on line 11a above?	11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
Section B. Type I Supporting Organizations			

#### Section B. Type I Supporting Organizations

- Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one 1 or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

#### Section C. Type II Supporting Organizations

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the 1 1 supporting organization was vested in the same persons that controlled or managed the supported organization(s).

#### Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No " evolution in <b>Part VI</b> how			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played			
	in this regard.	3		

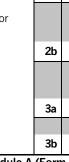
#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). С

#### 2 Activities Test. Answer lines 2a and 2b below.

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- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 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.



2a

Yes

Yes

No

No

Yes

1

2

No

Part V

Page 6

1 Check here if the organization satisfied the Integral Part Test as a qualifying t instructions. All other Type III non-functionally integrated supporting organization	trust on Nov ations must	v. 20, 1970 (explain in complete Sections A	Part VI). <b>See</b> through E.
Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	is <b>6</b>		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for she tax year or assets held for part of year):	ort		
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
<b>3</b> Subtract line 2 from line 1d.	3		
<b>4</b> Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

Schedule A (Form 990) 2022

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

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Schedule A (Form 990) 2022

Schedule A (Form	n <b>990) 2022</b>	Schoolhouse	of Wonder		56-1670	0472 Page 8		
Part VI       Supplemental Information.       Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part II, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)         Part II, Line 10 - Other Income								
	and Source	2022	2021	2020	2019	2018		
Credit (	Card Rebates Total	\$ 255. \$ 255.	<u>\$0.</u>	<u>\$0.</u>	\$0.	\$ 1,831. \$ 1,831.		

#### Schedule B (Form 990)

Department of the Treasury

Internal	Revenue	Service	

## PUBLIC DISCLOSURE COPY Schedule of Contributors

OMB No. 1545-0047

2022

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

ame of the organization Employer identification number		Employer identification number
Schoolhouse of Wonder 56-1670472		
Organization type (check one)	:	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	on
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)	1	1	Page <b>2</b>
Name of organization	Employer identification number		
Schoolhouse of Wonder	56-1670472		

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp	bace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$6,000.	Person     X       Payroll     Image: 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.)
(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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person     Image: Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)	1	1	Page <b>3</b>
Name of organization	Employer id	dentification n	umber
Schoolhouse of Wonder	56-167	70472	

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

	<b>Property</b> (see instructions). Use duplicate copies of Part II if ac		1
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>N/A</u>			
		<sup>9</sup>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I		(See instructions.)	
		\$\$	
(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

	B (Form 990) (2022)		1 1 Page <b>4</b>		
Name of orga			Employer identification number		
	house of Wonder		56-1670472		
Part III		for the year from any one co ompleting Part III, enter the total of	ations described in section 501(c)(7), (8), ontributor. Complete columns (a) through (e) and <i>exclusively</i> religious, charitable, etc., nstructions.)\$N/A		
	Use duplicate copies of Part III if additional		· · · · · · · · · · · · · · · · · · ·		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	N/A				
	Transformala norma addres	(e) Transfer of gift	Deletienskie of two of two of two of two of two		
	Transferee's name, addres	·s, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
	+				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
	<u> </u>	·			
BAA		TEEA0704L 07/22/22	Schedule B (Form 990) (2022)		

#### Supplemental Financial Statements SCHEDULE D 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. (Form 990) **Open to Public** Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization Employer identification number Schoolhouse of Wonder 56-1670472 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... 1 2 Aggregate value of contributions to (during year) . . . . . 3 Aggregate value of grants from (during year) . . . . . . . Aggregate value at end of year ..... 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?... No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring 6 No impermissible private benefit?..... Yes Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the 2 last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a) ..... 2 c d Number of conservation easements included in (c) acquired after July 25, 2006 and not on a historic structure listed in the National Register 2 d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year Δ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, 5 No Yes and enforcement of the conservation easements it holds?..... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? Yes No 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: Ś (i) Revenue included on Form 990, Part VIII, line 1..... (ii) Assets included in Form 990, Part X..... Ś 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1

<b>b</b> Assets included in Form 990, Part X		
A For Paperwork Reduction Act Notice, see the Instructions for Form 990.	TEEA3301L	07/06/22

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Schedule D (Form 990) 2022

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OMB No 1545-0047

Schedule D (Form 990) 2022 Schoo			-	56-1670		Page <b>2</b>
Part III Organizations Main	taining Collection	ons of Art, Histori	cal Treasures, or	Other Similar As	sets (cont	inued)
<b>3</b> Using the organization's acquisition items (check all that apply):	, accession, and othe		-	e significant use of its c	ollection	
a Public exhibition			change program			
<b>b</b> Scholarly research	-1:	e Other				
c Preservation for future gener		d avvalation la avvit de avvit formette	er the errorianticule er	unione en la la		
<ul> <li>Provide a description of the organiz Part XIII.</li> <li>During the upper did the exception</li> </ul>		, ,	Ū			
5 During the year, did the organiza to be sold to raise funds rather th	an to be maintained	as part of the organi	zation's collection?		Yes	No
Part IV Escrow and Custod reported an amount on Fo	ial Arrangement	ts. Complete if the ord			IV, line 9, or	
<b>1 a</b> Is the organization an agent, trus on Form 990, Part X?	stee, custodian or ot	her intermediary for co	ontributions or other a	ssets not included	Yes	No
<b>b</b> If "Yes," explain the arrangement ir	n Part XIII and comple	ete the following table:			<b></b>	
					Amount	
c Beginning balance.				-		
d Additions during the year						
e Distributions during the year f Ending balance				1e 1f		. <u> </u>
<b>2a</b> Did the organization include an a					Vac	No
<b>b</b> If "Yes," explain the arrangement				-		No
			in has been provided (			
Part V Endowment Funds.	Complete if the orga	nization answered "Ye	s" on Form 990. Part l'	V. line 10.		
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four yea	ars back
<b>1 a</b> Beginning of year balance	32,722.		26,170.	22,440.		,331.
<b>b</b> Contributions.						,
<b>c</b> Net investment earnings, gains, and losses	-4,696.	3,333.	3,817.	4,030.	-1	,591.
d Grants or scholarships						
e Other expenditures for facilities and programs				0.		
<b>f</b> Administrative expenses	304.		283.	300.	<u> </u>	300.
<b>g</b> End of year balance	27,722.		29,704.	26,170.	22	2,440.
2 Provide the estimated percentage	-	end balance (line 1g,	column (a)) held as:			
a Board designated or quasi-endow						
<b>b</b> Permanent endowment	75.00 %					
	5.00 %	00/				
The percentages on lines 2a, 2b, and						
<b>3a</b> Are there endowment funds not in t	he possession of the	organization that are he	eld and administered for	r the	Yes	No
organization by: (i) Unrelated organizations					3a(i) X	
(ii) Related organizations					3a(ii)	X
<b>b</b> If "Yes" on line 3a(ii), are the relation					3b	
4 Describe in Part XIII the intended						
Part VI Land, Buildings, an			000 1010			
Complete if the organizati		n Form 990, Part IV, lir	ne 11a. See Form 990,	Part X, line 10.		
Description of property	(a) Cos			(c) Accumulated depreciation	(d) Book value	
<b>1 a</b> Land	`					
<b>b</b> Buildings.						
c Leasehold improvements						
<b>d</b> Equipment			25,390.	20,338.	ĩ	5,052.
<b>e</b> Other				.,		_,
otal. Add lines 1a through 1e. (Colum	nn (d) must equal Fo	orm 990, Part X, colum	nn (B), line 10c.)		ŗ	5,052.
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Part VII	Investments — Other Securities. Complete if the organization answered "Yes" or	Form 990 Part IV line	N/A 11h See Form 990 Part X line 12	
(a) Descri	ption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-c	nf-vear market value
	al derivatives.			your market value
	held equity interests.			
(3) Other				
(A)				
<u>(C)</u>		-		
<u>(D)</u>		-		
(B) (C) (D) (E) (F)		-		
<u>(F)</u>		-		
(G)		-		
(H) — — — — —				
(l)				
	n (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII	Investments – Program Related. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	N/A e 11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX	Other Assets.	N/2		
	Complete if the organization answered "Yes" or	<u>n Form 990, Part IV, line</u> escription	e 11d. See Form 990, Part X, line 15.	(b) Book value
(1)	(8) 20	scription		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)				
Part X	umn (b) must equal Form 990, Part X, column ( Other Liabilities.			
1.	Complete if the organization answered "Yes" or	ription of liability	e The or Th. See Form 990, Part X, line 2	b. (b) Book value
	al income taxes	ription of hability		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				

Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)....

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

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56-1670472

Schedule D (Form 990) 2022 Schoolhouse of Wonder	56	-1670472	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statement	s With Revenue per Re	eturn. N/A	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2a		
<b>b</b> Donated services and use of facilities	2 b		
<b>c</b> Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)			
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b.	4a		
<b>b</b> Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b	····	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Part XII Reconciliation of Expenses per Audited Financial Statemen	ts With Expenses per	Return. N/A	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	• •		
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		-	
a Donated services and use of facilities	2a		
<b>b</b> Prior year adjustments.	2b		
<b>c</b> Other losses	2c		
d Other (Describe in Part XIII.)			
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1.		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b.	4a		
<b>b</b> Other (Describe in Part XIII.)	4 b		
c Add lines <b>4a</b> and <b>4b</b>		4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	· · · · · · · · · · · · · · · · · · ·	5	
Part XIII Supplemental Information.			

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### Part V, Line 4 - Intended Uses Of Endowment Fund

The intended use of income produced from Endowment funds is to further the programs

and mission of Schoolhouse of Wonder.

OMB No. 1545-0047
2022
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Schoolhouse of Wonder

56-1670472

#### Form 990, Part VI, Line 11b - Form 990 Review Process

Prior to filing, the Form 990 will be reviewed by the Chief Executive Officer, and then distributed to the full Board for review.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The Conflict of Interest policy is monitored by the Board Chairperson and reviewed and signed at the beginning of each fiscal year by all staff and board members with significant decision-making authority. It is each signator's obligation to disclose any potential conflict to the Board Chairperson as soon as it is known or reasonably should be known. The Board Chairperson determines if an actual conflict exists. An individual with a conflict shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement that results in the conflict of interest.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The process for determining executive compensation includes review and approval by independent persons, review of comparability data, and contemporaneous substantiation of the deliberation and decision.

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The three most recent Form 990s (including financial information), the Bylaws, Articles of Incorporation, Form 1023 Application for Exemption, and Conflict of Interest policy are provided to the public upon request.