### ··· 990

#### 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.

2022 Open to Public Inspection

Go to www.irs.gov/Form990 for instructions and the latest information. and ending A For the 2022 calendar year, or tax year beginning D Employer identification number C Name of organization Check if applicable: STRIDER EDUCATION FOUNDATION INC. Address change 81-4580473 Doing business as Name change Number and street (or P.O. box if must is not delivered to street address) 605-956-3877 2221 N PLAZA DRIVE Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/ 2,229,774 RAPID CITY SD 57702 G Gross receipts Amended return Name and address of principal officer: H(a) Is this a group return for subordinates Yes X No Application pending LISA WEYER Hfb) Are all subordinates included? 2221 N PLAZA DRIVE if "No." attach a list. See instructions 57702 RAPID CITY SD 4947(a)(1) or 527 X 501(c)(3) 501(c) Tax-exempt status: WWW.ALLKIDSBIKE.ORG H(c) Group examption number Website: L Year of formation: 2016 M State of legal domicile: SD Form of organization: X Corporation. Trust Association Other Summary Part i 1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) od 4 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 4 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 130 6 6 Total number of volunteers (estimate if necessary) 0 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 7b 0 Current Year 894,942 1,766,954 8 Contributions and grants (Part VIII, line 1h) 0 9 Program service revenue (Part Vill, line 2g) 0 10 Investment income (Part Vill, column (A), lines 3, 4, and 7d) 16,196 205,790 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ...... 911,138 1,972,744 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ...... 646,175 1,260,746 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 55,529 58,669 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 16a Professional fundralsing fees (Part IX, column (A), line 11e)
b Total fundralsing expenses (Part IX, column (D), line 25)
96,038 150,725 191,009 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 852,429 1,510,424 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 58,709 Beginning of Current Year 462,320 19 Revenue less expenses. Subtract line 18 from line 12 End of Year 901,781 438,384 20 Total assets (Part X, line 16) 11,276 10,199 21 Total liabilities (Part X, line 28) 890,505 428,185 22 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of office Sign EXECUTIVE DIRECTOR LISA WEYER Here Type or print name and fille if PTIN Preparer's signature Check Print/Type preparer's name self-employed PD0479382 Pald JEAN SMITH, CPA KETEL THORSTENSON, 46-0257538 Firm's EIN Preparer Firm's name Use Only PO BOX 3140 605-342-5630 RAPID CITY, SD 57709-3140

May the IRS discuss this return with the preparer shown above? See instructions

		UNDATION INC.	81-4580473	Page
			line in this Part III	X
		poinse or note to any	ine in uns Part iii	
•				
				***************************************
organization undertak	e any significant program	services during the year	which were not listed on the	
				Yes X N
," describe these new :	services on Schedule O.			
e organization cease co	onducting, or make signifi	cant changes in how it con	nducts, any program	
s?		**********************		Yes X N
," describe these chan	ges on Schedule O.			
			e amount of grants and allo	cations to others,
al expenses, and rever	nue, if any, for each prog	ram service reported.		
\ (Cunanan	. 1 347 73	O including amount of C	1 260 746 1	(Revenue \$ 192,746
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) (Expense	s \$	including grants of \$	)	(Revenue \$
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			VI 1792 131 131 13131	
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program services (Des	scribe on Schedule (0.)			
nses \$	including gra	4.4	Revenue \$	
	Check if Sched describe the organization undertaken 990 or 990-EZ?  "describe these new eleganization cease or s?  "describe these change the organization's pass. Section 501(c)(3) all expenses, and revertible the section 501(c)(3) all expenses.  (Expense ) (Expense ) (Expense ) (Expense )	Check if Schedule O contains a residescribe the organization's mission:  3CHEDULE O  organization undertake any significant program orm 990 or 990-EZ?  "describe these new services on Schedule O. organization cease conducting, or make signifies?  "describe these changes on Schedule O. or the organization's program service accomplisives. Section 501(c)(3) and 501(c)(4) organization at expenses, and revenue, if any, for each program in the program of the	describe the organization's mission:  GCHEDULE O  organization undertake any significant program services during the year vices of year year of the organization cease conducting, or make significant changes in how it cores?  "describe these changes on Schedule O. The program service accomplishments for each of its three in the organization's program service accomplishments for each of its three in the year vices, and revenue, if any, for each program service reported.  (Expenses \$ 1,347,739 including grants of \$ 3 CHEDULE O  (Expenses \$ including grants of \$ 3 inc	Check if Schedule O contains a response or note to any line in this Part III describe the organization undertake any significant program services during the year which were not listed on the orm 990 or 990-E27  " describe these new services on Schedule O. organization cease conducting, or make significant changes in how it conducts, any program service accomplishments for each of its three largest program services. Section 501(x)3 and 501(x)40 organizations are required to report the amount of grants and alloal expenses, and revenue, if any, for each program service reported.  (Expenses \$ 1,347,739 including grants of \$ 1,250,746 )  (Expenses \$ including grants of \$ )  (Expenses \$ including grants of \$ )

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	Ne
	complete Schedule A	1	х	
	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		2
	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		2
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			Ė
	assessments, or similar amounts as defined in Rev. Proc. 98-197 if "Yes," complete Schedule C, Part III	5		:
	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-		ď
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
		6		
	"Yes," complete Schedule D, Part I  Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		ď
		7		:
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			_
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			:
	complete Schedule D, Part III	8		٠
	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			١.
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Ŀ
	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		١.
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		H
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 107 if "Yes,"	1		
	complete Schedule D, Part VI	11a		L
9	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		L
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	_	L
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 167 If "Yes," complete Schedule D, Pert IX	11d		L
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		L
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	L
a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	L
ь	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		
,	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Γ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
_	fundralsing, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			Г
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
3	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			Γ
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
,	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			T
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		L
3	Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on			Т
•	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
)	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			ł
,	If "Yes," complete Schedule G, Part III	19		
١	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			Ť
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	_	ŀ
b	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	-44	1	t
1	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
	COMPANDE FRANCISCO DE CALLOS CAMBRILLAS ROS CENTRAS CONTRACTO VALVANDA PARA PARA PARA PARA PARA PARA PARA PA			4

	at 11 all of the all o					Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individ	luals c	n			103	140
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			HE SE SOM	22		X
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 compens	sated					
	employees? If "Yes," complete Schedule J				23	-	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more th		0.46				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer				04-		
<b>b</b>	through 24d and complete Schedule K. If "No," go to line 25a  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception		• • • • •		24a	-	X
b	Did the organization maintain an escrow account other than a refunding escrow at any time during the			····	24b	-	$\vdash$
-	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	ir?		S-11	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an ex						
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I				25a		x
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person			***********			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or						
	If "Yes," complete Schedule L, Part I				25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to a	iny cu	rrent				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	i.					
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II				26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, tru						
	employee, creator or founder, substantial contributor or employee thereof, a grant selection commit	tee					
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of the						
	persons? if "Yes," complete Schedule L, Part III			Fig. 1 - 1935-1	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Sc	hedule	e L,				
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):						
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contril	outor?	H				
_	"Yes," complete Schedule L, Part IV				28a	X	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV				28b	-	X
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b	? IF					
	"Yes," complete Schedule L, Part IV				28c	X	_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Sche		<i>"</i> …		29	X	-
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qua						-
24	conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Sche				30		X
31	Did the organization adjudate, terminate, or dissolve and cease operations? If "res," complete Scrietal Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		V, Pa	яτ	. 31		Х
32	A STATE OF THE STA				32		x
33	complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under R		ione		32		-Ah
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I				33	6 1	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, P	ert II	a	333 55	33		-
-	B4 - 10 (14 K - 4			are the constant of the	34		x
35a			100	-14 D 15050 D-3			X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with			👀			-
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, lin			4.7.14.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-char	itable					
	related organization? If "Yes," complete Schedule R, Part V, line 2				36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related or	ganiza	tion	.,			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule F	R, Part	W.		37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, line	s 11b	and				
	19? Note: All Form 990 filers are required to complete Schedule C.				38	X	
P	art V Statements Regarding Other IRS Filings and Tax Compliance						
_	Check if Schedule O contains a response or note to any line in this Pa	rt V .					Ш
		ا ما	.			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	1				
Ь	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable payming (pambling) winnings to order winners?				d.		
	CELEGRATURE LINEAGUE TURNI ELINGUE VANDRICUS DE LINZES VANDRICUS.				11.46		

-onn	990 (2022) STRIDER EDUCATION FOUNDATION INC. 61-4560-				P	age o
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (con	tinue	ed)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		4			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retr	ums?	5.6	2b	Х	-
3a			***************************************	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedul			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	a financial account in a foreign country (such as a bank account, securities account, or other financial			4a		X
b	If "Yes," enter the name of the foreign country					
	See Instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia	Acco	ounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-			5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did					
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ilons (	or			
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	r good	ls			
	and services provided to the payor?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		***************************************	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	vas				
	required to file Form 8282?		[[	7c		X
d	if "Yes," Indicate the number of Forms 8282 filed during the year	7d				
6	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contr	act?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con			7f		X
9	if the organization received a contribution of qualified intellectual property, did the organization file			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	zation	file a Form 1098-C?	7h	X	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain	ined I	by the			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
В	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:		2			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F	om 1	041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance Issuers.					
а	is the organization licensed to issue qualified health plans in more than one state?		//	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which	i.		1		
	the organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c				_
14a	Did the organization receive any payments for indoor tanning services during the tax year?		10 30 mm 100 mm 11	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Scheol	dule C	e h mama is	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remu	nerati	on or			
	excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	ent ind	come?	16		X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any a	activiti	es			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management					
۸.	The state of the s	العما			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	5			
	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.			7		
ъ	Enter the number of voting members included on line 1a, above, who are independent	1b	4			
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				7.0	
	supervision of officers, directors, trustees, or key employees to a management company or other person?		150 111 195	3	X	-
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was file	kd? , , ,		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?	٠		6		X
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		X
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 y	ear by	the following			
a	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			_		
<b>.</b>	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
<b>26</b> 0	tion B. Policies (This Section B requests information about policies not required by the	nten	iai Kevenu	e Co		
					Yes	_
	Did the organization have local chapters, branches, or affiliates?			10a	_	X
D	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	- total	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fili	ng tne	iom?	11a	X	_
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				-	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	_
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	ise to	conflicts?	12b	X	
¢	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe on Schedule O how this was done	- 1000		12c	X	_
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?	. (4)	ē iš	14	X	
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					
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization	ğ		15b	_	X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See Instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
_	organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, FL, GA, IL, KS, K		**********	M,N	C	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T	(sectio	n 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain on Schedule O)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	terest	policy,			
	and financial statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords				
	ISA WEYER 2221 N PLAZA DRIVE	_	_			
R	APID CITY SD 5770	2	605	-95	6 - 3	877

Farm 990 (2	022 STRIDER	EDUCATION	FOUNDATION	INC.	81-4580473		P	age
Part VII	Compensation	of Officers, Dir	ectors, Trustees,	Key Emp	loyees, Highest	Compensated	Employees,	and

Page 7

Independent Contractors	_
Charly if Schedule O contains a response or note to any line in this Part VII	1 1
Chack it Schedule () contains a resnotise of note to any line in this Part VII	1 1

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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 recalved, 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 org				(0	2)						
(A) Name and title	(B) Average hours per week	erage box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employée	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations	
(1) LISA WEYER	40.00										
EXECUTIVE DIRECTOR	0.00			X				16,500	0		0
(2) JACK LYNASS	0.00										
PRESIDENT	2.00	x		x				0	0		0
(3) ROD WOODRUFF		-		_							
VICE PRESIDENT	2.00	x		x				0	0		0
(4) RYAN MCFARLAND	4.50										
SECRETARY/TREASURER	0.00	x		X				0	0		0
(5) RENE CREED											
BOARD MEMBER	2.00	x						0	0		0
(6) BRIAN KLOCK											
BOARD MEMBER	2.00	x						0	0		0
(7)											
	=										
(8)						П					
(9)		T	Т	T	T	T					
(10)		T	Т	T	T	T					
	27 10										
(11)											
8 3 % 00				1		1					

Form 990 (2022)

Total number of independent contractors (including but not limited to those listed above) who

received more than \$100,000 of compensation from the organization

							(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
								function revenue	business revenue	from tax under sections 512-514
1a	Federated cam	paigns		1a						
	Membership du			1b					Y-1	
C	Fundraising eve	nts		1c						
đ	Related organiz	ations		1d						
	Government grants (			1e					COLE TO	
f	All other contributions	gills, gra	ints,	1f	1.7	66,954				
а	and similar amounts in Noncash contributions				47.					
9	lines 1a-1f			1g 3		68,000			III A S S	
h	Total. Add lines	1a-1f					1,766,954			
_					1	Business Code				
2a		20. 550.								
þ										
C										
d										
е										
	All other progra Total. Add line									
	Investment inco									
3	other similar ar									
4	Income from In	restme	nt of tax-exem	ot bond	proceeds					
5	Royalties									
	rusyanuos		(i) Real			ersonal				
62	Gross rents	6a								
-	Less: rental expense									
	Rental inc. or (loss)	6c								
d			loss)			85				
	Gross amount from		(i) Securite			Other				
	sales of assets other than inventory	7a					5			
h	Less: cost or other									
	basis and sales exps	7b								
	: Gain or (loss)	7c								
	Net gain or (los									
	Gross income from	-								
-	(not including \$		-	1 1						
	of contributions n			1 1						
	1c). See Part IV,	•		Ba						
l b	Less: direct ex			8b						
	Net income or	(loss) f	rom fundraisin	events	3					
	a Gross income									
	activities. See	_	-	. 9a		13,044				
Ŀ	Less: direct ex			9b						
	Net income or			ctivities			13,044			13,04
	a Gross sales of									
	returns and all		•	10a		447,291				
l t	Less: cost of g			10b		257,030				
	c Net income or			nventory			190,261	190,261		
						Business Code				
11:	a OTHER INC	OME		S S	2 20	999999	2,485	2,485		
1	b			6						
11:	c									
	d All other rever									
L	Total. Add line						2,485			
_			instructions				1,972,744	192,746	0	13,04

Da .	not include amounts reported on lines 6b, to,	(A)	(B)	(C)	(D)
	b), and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,260,746	1,260,746		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16			I A STATE OF THE S	
4	Benefits paid to or for members				1676
5	Compensation of current officers, directors,				
	trustees, and key employees	16,500	16,500		
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	37,094	7,195	11,463	18,436
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	5,075	2,254	1,089	1,732
11	Fees for services (nonemployees):				
а	Management				
b					
C	Accounting	24,346		24,346	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other, (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	40,583	2,749		37,834
12	Advertising and promotion	34,493	26,112		8,381
13	Office expenses	34,148	4,576	29,572	
14	Information technology	18,917	12,503		6,414
15	Royalties				
16	Оссиралсу	21 522	10 540		10.000
17	Travel	31,600	12,640		18,960
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			488	
19		177		177	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	0.464	2 464		
23	Insurance	2,464	2,464		
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.)	4 201			4 201
a	EVENTS	4,281			4,281
þ					
C					
d	48 -46				
e		1 510 404	1,347,739	66,647	06 020
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs, Complete this line only if the	1,510,424	T/32//133	00,04/	96,038
70	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check her if following SOP 98-2 (ASC 958-720)				

	Check if Schedule O contains a response or note		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing		436,126	1	764,999
2	Savings and temporary cash investments			2	
3	Pledges and grants receivable, net			3	61,580
4			510	4	6,22
5	Accounts receivable, net  Loans and other receivables from any current or former	officer director			
3	trustee, key employee, creator or founder, substantial o				
1	controlled entity or family member of any of these person			5	
	Loans and other receivables from other disqualified per			-	
6	under section 4958(f)(1)), and persons described in se			6	
7 8				7	
7	Notes and loans receivable, net			8	
	Inventories for sale or use		1,748	9	68,97
9	Prepaid expenses and deferred charges		1,740		00,37.
10a	Land, buildings, and equipment: cost or other	40-			
	basis. Complete Part VI of Schedule D	10a		40	
		10b		10c	
11	Investments—publicly traded securities			11	
12	Investments—other securities. See Part IV, line 11			12	
13	Investments—program-related. See Part IV, line 11			13	
14	Intangible assets			14	
15			420.004	15	001 50
16	Total assets. Add lines 1 through 15 (must equal line :		438,384	16	901,78
17	Accounts payable and accrued expenses	10,199	17	11,27	
18	Grants payable		18		
19	Deferred revenue		19		
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability. Complete Part IV	of Schedule D		21	
22	Loans and other payables to any current or former office	cer, director,			
22	trustee, key employee, creator or founder, substantial of	contributor, or 35%			
	controlled entity or family member of any of these person	ons		22	
23	Secured mortgages and notes payable to unrelated this	rd parties		23	
24	Unsecured notes and loans payable to unrelated third	parties		24	
25	Other liabilities (including federal income tax, payables	to related third			
	parties, and other liabilities not included on lines 17-24				
	of Schedule D			25	
26	Total liabilities. Add lines 17 through 25	4 . 2 . 4 . 4 . 4 . 4	10,199	26	11,27
	Organizations that follow FASB ASC 958, check h	ere X			
	and complete lines 27, 28, 32, and 33.				
27	Net assets without donor restrictions		194,204	27	492,74
28			233,981	28	397,76
	Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, or and complete lines 29 through 33.				
	and complete lines 29 through 33.	_			
27 28 29 30 31 32	Capital stock or trust principal, or current funds			29	
30	Paid-in or capital surplus, or land, building, or equipme			30	
31	Retained earnings, endowment, accumulated income,			31	
32	Total net assets or fund balances	,	428,185	32	890,50
1 24	TOWN THAT COURSE OF THE PARCETOOD		438,384	33	901,78

Form 990 (2022) STRIDER EDUCATION FOUNDATION INC. 81-4580473		Par	pe 12
Part XI Reconciliation of Net Assets			
Check if Schedule O contains a response or note to any line in this Part XI			
1 Total revenue (must equal Part VIII, column (A), line 12)	1,97	2,	744
2 Total expenses (must equal Part IX, column (A), line 25)	1,51	0,4	124
3 Revenue less expenses. Subtract line 2 from line 1	46	2,:	320
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	42	28,	185
5 Net unrealized gains (losses) on investments 5			
6 Donated services and use of facilities 6			
7 Investment expenses 7			
8 Prior period adjustments			
9 Other changes in net assets or fund balances (explain on Schedule O) 9			
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
32, column (B))	89	0,1	505
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response or note to any line in this Part XII			
		Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked "Other," explain on			
Schedule O.			v
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		х
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
reviewed on a separate basis, consolidated basis, or both:		- 1	
Separate basis Consolidated basis Both consolidated and separate basis			
b Were the organization's financial statements audited by an independent accountant?	2b	x	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
separate basis, consolidated basis, or both:			
X Separate basis Consolidated basis Both consolidated and separate basis			
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	х	
If the organization changed either its oversight process or selection process during the tax year, explain on			
Schedule O.			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
Uniform Guldance, 2 C.F.R. Part 200, Subpart F?	3a		X
b if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3Ь		
	Form	990	(2022)

#### SCHEDULE A (Form 990)

## **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.

Open to Pub

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization	CMD I DWD WOLC	ATION FOUNDATION	NI TNI	7		Employer Ident	ification number		
Bort I Boos	on for Public Charity	Status. (All organization	ue milet	comple	te this part				
Part I Reas	to salute foundation bussus	e it is: (For lines 1 through 12	chack on	v one ho	v)	OSS IIISU	acuona.		
1 A church, co	t a busine of chimphon or con	ociation of churches described	d in section	n 170(b)	~/ /1VAVi).				
		(A)(ii). (Attach Schedule E (Fo		it iroşw,	( - )( - )( - )				
		ce organization described in a		окъх 1 ХА	ViH).				
						A)(iii). Enter th	e hospital's name.		
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:									
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
section 170(b)(1)(A)(Iv). (Complete Part II.)  6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
6 A federal, st	ate, or local government or g	overnmental unit described in	secuon i	/UDJUIJ	rijivi. Lunit or foom ti	he general sur	hila		
	tion that normally receives a : : section 170(b)(1)(A)(vi). (0	substantial part of its support	nom a gov	emmente	i utili or irotii ii	ne deneral bo	UNIC.		
		170(b)(1)(A)(vi). (Complete P	art II.)						
9 A community	y must described in section des	cribed in section 170(b)(1)(	Mint) oners	nted in co	niunction with	a land-grant c	ollege		
or university	or a non-land-grant college of	of agriculture (see instructions	). Enter the	name, o	ity, and state o	of the college of	or		
receipts from	tion that normally receives (1 n activities related to its exen n gross investment income a	) more than 33 1/3% of its su pt functions, subject to certain d unrelated business taxable 0, 1975. See section 509(a)	pport from n exception Income (le	contribut s; and (2 ss sectio	ions, membersi i) no more than in 511 tax) fron	a 331/3% of its	gross		
11 An organiza	tion organized and operated	exclusively to test for public s	afety. See	section	509(a)(4).				
12 An organiza	tion organized and operated	exclusively for the benefit of, 1	o perform 1	he functi	ons of, or to ca	my out the pu	rposes of		
one or more	publicly supported organizate	tions described in section 50 scribes the type of supporting	9(a)(1) or s	ection 5	i09(a)(2). See :	section 509(a	)(3). Check		
a Type I.	A supporting organization on	erated, supervised, or control	ed by its s	upported	organization(s)	, typically by	giving		
the sup	ported organization(s) the pov	ver to regularly appoint or elec	a majorit	y of the	lirectors or trus	lees of the			
supporti	ng organization. You must o	complete Part IV, Sections A	and B.						
b Type II.	A supporting organization su	pervised or controlled in con-	nection with	its supp	orted organiza	tion(s), by hav	ing		
control o	or management of the suppor	rting organization vested in the	e same per	rsons tha	t control or ma	nage the supp	orted		
organiza	ation(s). You must complete	Part IV, Sections A and C.			متعمدة مسا		عدر ا		
c ∐ Type III	I functionally integrated. A oried organization(s) (see in	supporting organization opera structions). You must comple	ated in con ete Part IV	nection v , Section	nin, and tuncilo Is A, D, and E	nally integrate	d wien,		
d Type II	non-functionally integrate	ed. A supporting organization	operated in	connec	ion with its sup	oported organi	zation(s)		
that is r	not functionally integrated. Th	e organization generally must	satisfy a d	listributio	n requirement a	and an attentiv	eness		
requirer	nent (see instructions), You	must complete Part IV, Sec	tions A an	d D, and	l Part V.				
e Check t	his box if the organization rec	ceived a written determination	from the IF	S that it	is a Type I, Ty	pe II, Type III			
		on-functionally integrated supp	conting orga	anization.					
	umber of supported organiza								
		the supported organization(s).	that In the a		ful America	-\$	6.0 Amount of		
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(hv) is the c listed in you docum	r governing	(v) Amount (v) suppor instruc	rt (see	(vi) Amount of other support (see instructions)		
		20040 (000 =100 =100)	Yes	No			,		
/A3			1						
(A)									
(B)									
(C)									
(D)									
(E)									
			-						

Schedule A (Form 990) 2022
Part II Support 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 falled to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 20	22	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	301,660	467,024	658,696	894,942	1,76	66,954	4,089,276		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3	301,660	467,024	658,696	894,942	1,76	6,954	4,089,276		
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)					1,100,534		4,003,210		
6	Public support. Subtract line 5 from line 4						-	510, 809		
	tion B. Total Support							3,578,467		
$\overline{}$	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 20	22	(f) Total		
7	Amounts from line 4	301,660	467,024	658,696	894,942		_	4,089,276		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	00=,000	307,020	300,7330	031/312	1,766,954		4,003,276		
9	Net income from unrelated business activities, whether or not the business is regularly carried on					13,044		13,044		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)									
11	Total support. Add lines 7 through 10						_	4,102,320		
12	Gross receipts from related activities, etc	. (see instructions)					12	479,069		
13	First 5 years. If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year	r as a section 501	(c)(3)		-		
200	organization, check this box and stop he	re								
	tion C. Computation of Public									
14	Public support percentage for 2022 (line	5, column (f) divide	d by line 11, colun	nn (f))			14	87.23 %		
15	Public support percentage from 2021 Sch	edule A, Part II, lin	e 14			998	15	79.83 %		
16a	33 1/3% support test—2022. If the orga							lun.		
	box and stop here. The organization que	aliftes as a publicly	supported organiz	ation				X		
D	33 1/3% support test—2021. If the orga									
47	this box and stop here. The organization	quairies as a pub	licity supported org	anization	40 405 1					
17a	10%-facts-and-circumstances test—2									
	10% or more, and if the organization med		*							
	Part VI how the organization meets the f		•	•	as a publicly sup	ponea				
h	organization 10%-facts-and-circumstances test—2	624 S the areasing	tion did not about	a hay an line 49	40a 40b and 7a			·		
U		-		-						
	15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported									
18	organization  Private foundation. If the organization d	lid not chack a how	on line 12 16e 16	Sh 17a or 17h o	hack this have and	F00	15	F. P.		
10	inclusations		VITING 13, IUS, I	ou, rra, or rru, G	DUR YOU GILL YOUR	3CC				
_	III SII OCLIOIS		*****			E 25**				

Schedule A Form 990 2022 STRIDER EDUCATION FOUNDATION INC. 81-4580473

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

(Complete only if you	checked the box on line 1	10 of Part I or if the organization	n failed to qualify und	ler Part II.
If the organization fails	s to qualify under the tests	s listed below, please complete	Part II.)	

0	in the Organization sails to	quality under	uio todio lidiot	2 DOIGHT PIOGO				
	tion A. Public Support	(a) 2012	(b) 2019	(c) 2020	(d) 2021	(e) 2022	,	(f) Total
	dar year (or fiscal year beginning in)	(a) 2018	(D) 2019	(6) 2020	(u) 202 1	(8) 2022	-	(i) Total
1	Gits, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						_	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-evernpt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
P	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
8 8	Add lines 7a and 7b  Public support. (Subtract line 7c from					-	_	
_	line 6.)							
	tion B. Total Support	4 > 0040	(h) 0040	(=) 2000	(4) 2024	(%) 202	2	// Total
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202	2	(f) Total
9	Amounts from line 6							
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
C	Add lines 10a and 10b							
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First 5 years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax ye	ear as a section 50	01(c)(3)		
	organization, check this box and stop he	ere						
Sec	tion C. Computation of Public	Support Perc	entage					
15	Public support percentage for 2022 (line			lumn (f))			15	%
16	Public support percentage from 2021 Sci	hedule A, Part III.	line 15				16	%
Sec	tion D. Computation of Investn	nent income	Percentage					
17	Investment income percentage for 2022	(line 10c, column	(f), divided by line	e 13, column (f))			17	%
	Investment income percentage from 2021	Schedule A, Part	III, line 17				18	%
19a		ganization did not	check the box on	line 14, and line	15 is more than 33	1/3%, and li	ne	_
	17 is not more than 33 1/3%, check this	box and <b>stop he</b> r	re. The organizati	on qualifies as a p	oublicly supported	organization		L
b	33 1/3% support tests—2021. If the on	ganization did not	check a box on li	ne 14 or line 19a,	and line 16 is mor	e than 33 1/3	3%, and	г
	line 18 is not more than 33 1/3%, check	this box and <b>stop</b>	here. The organ	ization qualifles as	s a publicly suppo	rted organiza	tion	
20	Private foundation. If the organization	did not check a b	ox on line 14, 19a	, or 19b, check th	is dox and see ins			
						Sc	hedule /	(Form 990) 202

Supporting Organizations Part IV

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

#### Section A. All Supporting Organizations

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

	Yes	No
12		
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b 5c		
6		
7		
8		
9a		
9b		
9c		
10a		
106	Form 99	

Page 5

r ea	CTV Supporting Organizations (continues)			
			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		
	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,			
Sant	provide detail in Part VI. ion B. Type I Supporting Organizations	11c		
Seci	ION B. Type I Supporting Organizations		Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		res	MO
1	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	- 1		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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.	2		
Sect	ion C. Type II Supporting Organizations			
	71 11 0		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			7
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ion 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," explain in Part VI 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 Part VI the role the organization's	3		
Sect	supported organizations played in this regard.  tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see Instruction	arre)		
, a		naj.		
b				
c		nstructio	nas	
2	Activities Test, Answer lines 2a and 2b below.		Yes	No
- a	man and the first of the state			
	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,		1	
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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 "Yas" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

1	Check here if the organization satisfied the Integral Part Test as a qualifying true Instructions. All other Type III non-functionally integrated supporting organizations.			,
Sect	tion A – Adjusted Net Income	ono most com	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		(opional)
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	i Total (add lines 1a, 1b, and 1c)	1d		
е	B Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ect	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
	Enter 0.85 of line 1.	2		
3		3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

Schedule A (Form 990) 2022

(see instructions)

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

e Excess from 2022 ......

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete If the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Employer identification number

ST	RIDER EDUCATION FOUNDATION INC.			80473
ar	Organizations Maintaining Donor Advised I Complete if the organization answered "Yes" of	Funds or Other Similar Funds on In Form 990, Part IV, line 6.	Acco	unts.
		(a) Donor advised funds	(b)	Funds and other accounts
•	otal number at end of year			
	aggregate value of contributions to (during year)			
	Aggregate value of grants from (during year)			
	Aggregate value at end of year			
5	old the organization inform all donors and donor advisors in writing	that the assets held in donor advised		
1	unds are the organization's property, subject to the organization's e	xclusive legal control?		Yes No
	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 d	onor advisor, or for any other purpose		
	conferring impermissible private benefit?			Yes No
ar	II Conservation Easements.			
===	Complete if the organization answered "Yes" of	on Form 990, Part IV, line 7.		
	Purpose(s) of conservation easements held by the organization (che			
ĺ	Preservation of land for public use (for example, recreation or e	ducation) Preservation of a historically in	mportant	land area
ŀ	Protection of natural habitat	Preservation of a certified his		
-	Preservation of open space	ш		
. I	Complete lines 2a through 2d if the organization held a qualified co	nservation contribution in the form of a cons	ervation	
	pasement on the last day of the tax year.			teld at the End of the Tax Ye
	Total number of conservation easements		2a	
	Total acreage restricted by conservation easements			
	Number of conservation easements on a certified historic structure		1	
C	Number of conservation easements on a certified historic affectation.	ty 25, 2006, and not on a		
d	Number of conservation easements included in (c) acquired after so	ny 25, 2005, and not on a	2d	
	nistoric structure listed in the National Register  Number of conservation easements modified, transferred, released,	autinoviohad or terminated by the assents		ing the
		exunguished, or terminated by the organiza	audii Guii	ing the
	ax year	to Incomed		
4	Number of states where property subject to conservation easement	is located		
5	Does the organization have a written policy regarding the periodic r	monitoring, inspection, nandling of		Yes No
	violations, and enforcement of the conservation easements it holds			
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	ig of violations, and enlutting curiservation	easeme	its during the year
	The state of the s	stateties and enforcing concernation according	monto di	ring the week
7	Amount of expenses incurred in monitoring, inspecting, handling of	violations, and enforcing conservation ease	mens d	uning the year
	The state of the s	to 6, the manufacture of engine 470/bV4VD	W:1	
В	Does each conservation easement reported on line 2(d) above sat	isty the requirements of section 170(11)(4)(b)	KU)	☐ Yes ☐ N
	and section 170(h)(4)(B)(ii)?			🗀 tes 🗀 🚾
9	In Part XIII, describe how the organization reports conservation eas	sements in its revenue and expense statements that	ent and	a tha
	balance sheet, and include, if applicable, the text of the footnote to	the organization's tinancial statements that	describe	s the
_	organization's accounting for conservation easements.  It   Organizations Maintaining Collections of I	Not Winterinal Transcures or Othe	r Cimi	lor Apports
Pa	Complete if the organization answered "Yes"	on Form 990 Part IV line 8		iai Assets.
			an ahan	t modes
18	If the organization elected, as permitted under FASB ASC 958, not	to report in its revenue statement and balas	o of put	t works die
	of art, historical treasures, or other similar assets held for public ex	mippion, education, or research at futurerand	Se or bur	nic .
	service, provide in Part XIII the text of the footnote to its financial s	catements that describes tress items.	ahaat	uden af
Ь	If the organization elected, as permitted under FASB ASC 958, to	report in its revenue statement and balance	afbi-	OIKS OI
	art, historical treasures, or other similar assets held for public exhil	otton, education, or research in furtherance	or public	service,
	provide the following amounts relating to these items:			•
	(i) Revenue included on Form 990, Part VIII, line 1			
	(II) Assets Included in Form 990, Part X			\$
2	If the organization received or held works of art, historical treasure	s, or other similar assets for financial gain, p	provide th	10
	following amounts required to be reported under FASB ASC 958 m	elating to these items:		_
а	Revenue included on Form 990, Part VIII, line 1			\$
h	Assets included in Form 990 Part X		144-	Schedule D (Form 990) 20

SCHEdule D (Form 990) 2022 STRIDER				4560473	Page 2
Part III Organizations Maintain	ing Collections o	f Art, Historic	al Treasures, or	Other Simila	r Assets (continued)
3 Using the organization's acquisition, acceleration items (check all that apply):	ession, and other record	s, check any of th	e following that make	significant use of	its
a Public exhibition	d	oan or exchange	program		
b Scholarly research					
c Preservation for future generations	لبسا	***********			
4 Provide a description of the organization'	s collections and explai	n how they further	the organization's exe	emnt ouroose in F	Part
XIII.	- contracto mile complete		all diguissation can	mpt perpose in i	ait
5 During the year, did the organization soli	cit ar receive donatione	of art historical tre	accurae or other cimils	3F	
assets to be sold to raise funds rather the					Пу., Пи.
Part IV Escrow and Custodial	Arrangemente	part of the Organiz	audits Collections	***************	Yes No
Complete if the organiza 990, Part X, line 21.		" on Form 990	, Part IV, line 9, o	or reported an	amount on Form
1a is the organization an agent, trustee, cus	todian or other intermed	diany for contribution	no or other econic not		
included on Form 990, Part X?  b If "Yes," explain the arrangement in Part	VIII and samplets the f-				Yes No
b ii res, explain the allangement iii rait	Alli and complete the it	Mowing Labie:			
a Designation between					Amount
c Beginning balance				1c	
d Additions during the year				1d	
e Distributions during the year				19	
f Ending balance				1f	
2a Did the organization include an amount of	n Form 990, Part X, line	e 21, for escrow or	custodial account liab	ility?	Yes No
b If "Yes," explain the arrangement in Part	XIII. Check here if the	xplanation has bee	en provided on Part XI	II,,	
Part V Endowment Funds.					
Complete if the organiza	tion answered "Yes	on Form 990	Part IV, line 10.		
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years	back (e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and					
losses					
d Grants or scholarships					
e Other expenditures for facilities and					
programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentage of the	current year end halanc	e /line 1a column	(a)) held are		
a Board designated or quasi-endowment		e (me ig, codini)	(a)) ficiu as.		
b Permanent endowment 9					
c Term endowment %	•				
The percentages on lines 2a, 2b, and 2c	chould count 100%				
3a Are there endowment funds not in the po		otion that are hold	and administered for t	ha	
	ssession of the organiza	auon mar are nero	and administered for t	116	[14 ] 11
organization by:					Yes No
(i) Unrelated organizations	• • • • • • • • • • • • • • • • • • • •		*******   1.11 1.		3a(i)
(ii) Related organizations		tand on Onkodide 6			3a(ři)
b If "Yes" on line 3a(li), are the related orga			·····		3b
4 Describe in Part XIII the intended uses of		owment tunds.			
Part VI Land, Buildings, and E		J F 200	Deat N/ Pro 44	0	00 5 114 " - "
Complete if the organization					
Description of property	(a) Cost or other ba	'''		) Accumulated	(d) Book value
	(investment)	(6	other)	depreciation	
1a Land					
b Buildings					
c Leasehold improvements					
d Equipment					
e Other					
Total. Add lines 1a through 1e. (Column (d) me	ist equal Form 990, Pai	rt X, column (B), lin	10c.)		
70.0					

Schedule D (Form 990) 2022

Part VII	Investments – Other Securities.  Complete if the organization answered "Y  (a) Description of security or category	es" on Form 990, Part IV,	line 11b. See Form 990, Part X, line 1
	(a) Description or security or category (including name of security)	(n) Dook varie	Cost or end-of-year market value
_			Oxot of otherwise market value
Financial	derivatives		
Closely he	eld equity interests		
Other		200	
(A)		-2476	
(B)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(C)			
(D)	*** **********************************	****	
(E)			
(F)			
(G)			
(H)			
al. Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)		
art VIII	Investments - Program Related.		
	Complete If the organization answered "Y	es" on Form 990, Part IV,	line 11c. See Form 990, Part X, line 1
	(a) Description of Investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
)			
)			
)			
)			
)			
)			
)			
)			
)			
Part IX	Other Assets.  Complete if the organization answered "Y		line 11d. See Form 990, Part X, line (b) Book value
	(a) moonth	guii	(a) Dook Yalida
)			
)			
)			
)			
)			
)			
)			
)			
)	with word a well forms 000. But W and ID For 45.		
tal. Colun	nn (b) must equal Form 990, Part X, col. (B) line 15.)		
	Other Liabilities.  Complete if the organization answered "	es" on Form 990, Part IV	line 11e or 11f. See Form 990, Part
Part X	<u>i</u> _		
Part X	line 25.	of liability	(h) Brede volus
	line 25.	of liability	(b) Book value
) Federal	line 25.	of liability	(b) Book value
) Federal	line 25.	of liability	(b) Book value
) Federal	line 25.	of liability	(b) Book value
) Federal 2) 3)	line 25.	of liability	(b) Book value
Federal	line 25.	of liability	(b) Book value
) Federal	line 25.	of liability	(b) Book value
) Federal () () () () () () () () () () () () ()	line 25.	of liability	(b) Book value
) Federal () () () () () () () () () () () () ()	line 25.	of liability	(b) Book value
Federal () () () () () () () () () () () () ()	line 25.	of liability	(b) Book value

	edule D (Form 990) 2022 SIRIDER EDUCATION FOUNDATION INC. 81-45804		Page 4
P	rart XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	er Retu	rn.
1	Total revenue, gains, and other support per audited financial statements	1	2,405,451
2			2,103,131
	Net unrealized gains (losses) on investments		
ь	Donated services and use of facilities 2b 432,70°	7	
c	Recoveries of prior year grants 2c		
d	d Other (Describe in Part XIII.)		
9	Add lines 2a through 2d	2e	432,707
3	Subtract line 2e from line 1	3	1,972,744
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	1.5	
C	: Add lines 4a and 4b	4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,972,744
Pa	art XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	turn.
-	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		1 442 444
	Total expenses and losses per audited financial statements	1	1,943,131
2			
a	Donated services and use of facilities 2a 432,707		
0	Prior year adjustments 2b		
G	Other losses 2c 2d 2d	- 1	
u o	***************************************	- 20	122 707
3	Add lines 2a through 2d Subtract line 2e from line 1	2e	432,707 1,510,424
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	1,310,727
	Investment expenses not included on Form 990, Part VIII, line 7b		
h	O Other (Describe in Part XIII.)	1	
		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,510,424
	art XIII Supplemental Information.		
_	ride 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	fine
	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	.,,	
	ART X - FIN 48 FOOTNOTE		
	***************************************		
A	T DECEMBER 31, 2022, THE FOUNDATION BELIEVES NO SIGNIFIC	ANT I	INCERTAIN TAX
		•••••	***************************************
P	OSITIONS OR LIABILITIES EXIST.		
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Schadula D (F	orm 990) 2022	STRIDER	EDUCATION	FOUNDATION	INC.	81-4580473	Page 5
Part XIII	Supplement	al informati	on (continued)				
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SCHEDULE I (Form 990)

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

#### Grants and Other Assistance to Organizations. Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.

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

OMB No. 1545-0047 2022 Open to Public

▶ 0

Schedule I (Form 990) (2022)

Department of the Treasury Informal Revenue Service STRIDER EDUCATION FOUNDATION INC. 81-4580473 Part I General Information on Grants and Assistance 1 Does the organization maintain excrete to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

3 Part III Grant and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of organization (a) IRC section (b) EIN (d) Amount of cash (1) Method of valuation (book, FBM, appraisal, other (e) Amount of (h) Purpose of grant or government orant noncash assistance or assistance (1) LOS ANGELES UNIFIED SCHOOL DISTRICT 333 SOUTH BEAUDRY AVENUE
S ANGELES CA 90017 LEARN RIDE PROGRAM LOS ANGELES 95-6001905 GOV 245,353 COST BIKES (2) MAPLETON PUBLIC SCHOOLS 2410 POZE BLVD CO 80229 LEARN RIDE PROGRAM THORTON 84-6000817 GOV 41,240 COST BIKES (3) FLAGSTAFF PUBLIC SCHOOLS 7150 E SILVER SADDLE ROAD
AGSTAFF AZ 86004 LEARN RIDE PROGRAM 61-1520511 GOV 28,030 COST BIKES (4) METRO NASHVILLE PUBLIC SCHOOLS METRO NASHVANA 67 FAIRFIELD AVE TN 37203 LEARN RIDE PROGRAM NASHVILLE 62-0717138 GOV 25,140 COST (5) MONTROSE COUNTY SCHOOL DISTRICT BIKES MONTROSE COUNTS
930 COLORADO AVENUE
CO 81401 LEARN RIDE PROGRAM MONTROSE 84-0517051 GOV 20,950 COST BIKES (6) CHINLE UNIFIED SCHOOL DISTRICT 19 ROUTE 27
AZ 86503 LEARN RIDE PROGRAM CHINLR 86-6006232 GOV 20,950 COST BIKE (7) ARNOLD PUBLIC SCHOOLS ARNOLD PUBLIC 3871 JEFFCO BLVD MO 63010 LEARN RIDE PROGRAM ARNOLD 43-6000085 GOV 19,630 COST BIKE (8) SALT LAKE CITY SCHOOL DISTRICT 750 W 200 N
SALT LAKE CITY UT 84116 74-2563849 GOV LEARN RIDE PROGRAM 19,630 COST BIKES (9) CHARLOTTE MECHLENBURG SCHOOL DISTRI 6500 BARRINGTON DR LEARN RIDE PROGRAM NC 28215 CHARLOTTE 81-4133706 GOV 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table BIKES 2 Enter total number of section 30 (0,50) and 90 section 30 (0,50) and ▶ 35

SCHEDULE I (Form 990)

#### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.

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

OMB No. 1545-0047 2022 Open to Public

81-4580473

Department of the Treasury Internal Revenue Service

Part 1

NEWBURG

PHOENIX

RIO RICO

COLUMBUS

(9) BERTHOLOMEW CDC

General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

It II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any reciplant that received more than \$5,000. Part II can be duplicated if additional space is needed. (e) Amount of noncesh essistance (book, RMV, appress). (g) Description of (a) IRC section (if aplicable (d) Amount of cash (h) Purpose of grant (a) Name and address of organization (b) EIN or assistance or government (1) CHARLES COUNTY PUBLIC SCHOOLS CHARLES COUNT RD
12872 ROCK POINT RD
MD 20664 LEARN RIDE PROGRAM 16,760 COST BIERS 52-6000092 GOV (2) RUSSELLVILLE FUBLIC SCHOOLS LEARN RIDE PROGRAM Russellville 71-6020690 GOV 16,750 COST BIKE 9 (3) LITTLE ROCK SCHOOL DISTRICT LEARN RIDE PROGRAM 905 MARTIN LUTHER KING JR DR TILE ROCK AR 72206 16,750 COST BIKES LITTLE ROCK 82-2431860 GOV (4) ROOSEVELT SCHOOL DISTRICT ROOSEVELL 4610 S 12TE ST AZ 85040 LEARN RIDE PROGRAM 32-0360605 GOV 12,570 COST BIKES (5) HOT SPRINGS SCHOOL DISTRICT LEARN RIDE PROGRAM 701 MAIN ST 46-6001559 GOV 12,570 COST BIKES (6) SANTA CRUZ VALLEY USD SANTA CRUZ VALUE | 1374 W FRONTAGE RD | AZ 85648 | 86-0498513 GOV LEARN RIDE PROGRAM 12,570 COST BIKES (7) TUBA CITY UNIFIED SCHOOL DISTRICT LEARN RIDE PROGRAM PO BOX 67
TUBA CITY AZ 86045 12,570 COST 86-0592826 GOV BIKES (8) PORTLAND PUBLIC SCHOOLS 7200 NE 11TH AVE OR 97211

12,345 COST

10,890 COST

BIKES

3 Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.

12150 S STATE ROAD 58 DLUMBUS IN 47201 35-1113190 GOV

STRIDER EDUCATION FOUNDATION INC.

93-6000830 GOV

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) (2022)

LEARN RIDE PROGRAM

LEARN RIDE PROGRAM

SCHEDULE 1 (Form 990)

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www.frs.gov/Form990 for the latest information.

OMB No. 1545-0047 2022 Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization STRIDER EDUCATION	FOUNDATIO	ON INC	1.				mployer Ident	Figation nu	mber
Part I General Information on Grants as			-				JT-#301	14/3	
Does the organization maintain records to substantiate the selection criteria used to award the grants or assis     Describe in Part IV the organization's procedures for m	tance? conitoring the use o	f orant fun	ds in the United States	B.				Yes	
Part II Grants and Other Assistance to Part IV, line 21, for any recipient the	Domestic Org	anization	as and Domestic	Governments.	Complete if the	organizatio	n answere	d Yes	on Form 990,
(a) Name and address of organization     or government	(b) EIN	(b) IRC section if acclicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisel,		0	n) Purpose or essist	
(1) COLORADO SPRINGS PUBLIC SCHOOLS 1921 E YAMPA ST COLORADO SPRINGS CO 80909	84-6001179	GOV		17,470	COST	BIKES	LEARN	RIDE	PROGRAM
(2) SAINT PAUL PUBLIC SCHOOLS 1930 COMO AVENUE SAINT PAUL MN 55106	41-0901311	GOV		10,050	COST	BIKES	LEARN	RIDE	PROGRAM
(3) RED CREEK CENTRAL SCHOOL DISTRICT 6624 SOUTH STREET RED CREEK MY 13143	15-6002350	GOV		B,380	COST	BIKES	LEARN	RIDE	PROGRAM
(4) COWETA COUNTY PUBLIC SCHOOLS 154 MILLARD FARM INDUSTRIAL BLVD NEWMAN GA 30236	58-6000219	GOV		8,380	COST	BIKES	LEARN	RIDE	PROGRAM
(5) LANSING SCHOOL DISTRICT 3333 S WESTNEDGE AVE LANSING MI 49008	38-6001929	GOV		7,720	COST	BIRES	LEARN	RIDE	PROGRAM
(6) ROGERS FUBLIC SCHOOLS 121 SCHOOL AVE LOWELL AR 72745	71-6021134	GOV		7,720	COST	BIRES	LEARN	RIDE	PROGRAM
(7) MATTOON COMMUNITY SCHOOL DISTR #: 4201 WESTERN AVE MATTOON IL 61938	37-6002688	GOA		7,540	COST	BIKES	LEARN	RIDE	PROGRAM
(8) SPRINGDALE SCHOOL DISTRICT 900 S POWELL SPRINGDALE AR 72764	71-6021364	gov		7,540	COST	BIKES	LEARN	RIDE	PROGRAM
	91-6001541			7,540	COST	BIKES		RIDE	PROGRAM
2 Enter total number of section 501(c)(3) and government 3 Enter total number of other organizations listed in the lit	ne 1 table	d in the lin	e 1 table				Þ.		
For Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.							ule I (Fo	rm 990) (2022)

#### SCHEDULE I (Form 990)

#### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

2022 Open to Public nspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization 81-4580473 STRIDER EDUCATION FOUNDATION INC. General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantes' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part IV can be duplicated if additional space is needed. (h) Purpose of grant (f) Method of valuation (g) Description of (book, PMV, appraise), (b) EIN (a) IRC auction (d) Amount of cash (e) Amount of (a) Name and address of organization or government (1) SANTA ANA UNIFIED SCHOOL DISTRICT 700 S FLOWER

CA 92801 LEARN RIDE PROGRAM 95-6002823 GOV 7,540 COST BIKES SANTA ANA (2) BROOKINGS SCHOOL DISTRICT 718 5TH ST S SD 57006 LEARN RIDE PROGRAM 7,503 COST BIKES 46-6000834 GOV BROOKINGS (3) SPRINGDALE PUBIC SCHOOLS SPRINGUALS
2878 POWELL ST
AR 72764 LEARN RIDE PROGRAM BIKES 71-6021200 GOV 7,300 COST SPRINGDALE (4) LANSING SCHOOL DISTRICT LEARN RIDE PROGRAM 7,060 COST BIKES 38-6001599 GOV (5) NESTUCCA VALLEY SCHOOL DISTRICT NESTUCCA 36925 HWY 101 B OR 97112 LEARN RIDE PROGRAM 6,910 COST BIKES CLOVERDALE 93-1144375 GOV (6) DENVER PUBLIC SCHOOLS 7480 NORTH BROADWAY

CO 80221 LEARN RIDE PROGRAM 84-1205807 GOV 6,880 COST BIKES DENVER (7) NORTHWEST R-1 SCHOOL DISTRICT NORTHWEST 4630 BRENNAN RD MO 63049 LEARN RIDE PROGRAM 6,700 COST BIKES 43-6000854 GOV HIGH RIDGE (8) GROVETON ELEMENTARY SCHOOL LEARN RIDE PROGRAM 19 SCHOOL ST NH 03590 02-6000660 GOV 5,460 COST BIKES NORTH STRATFORD 3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **>** .....

Schedula I (Form 990) (2022)

Schedule   Form 990   2022   STRIDER ED	UCATION FOUNDA	TION INC. (	81-4580473	would "Vos" on Form 000	Page 2
Part III Grants and Other Assistance Part III can be duplicated if ac			une organization ansi	wered "res" on Form 990,	Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information.	Provide the information	required in Part I,	line 2; Part III, colun	nn (b); and any other addi	tional information.
SEE SCHEDULE I SUPPLEMEN	IAL INFORMATIO	N WORKSHEET			
		********		***************************************	••••••••••
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Schedule I (Form 990) (2022)

# Supplemental Information

SCHEDULE I (Form 990)

For calendar year 2022, or tax year beginning

and ending

2022

Vame	of	the	organization

STRIDER EDUCATION FOUNDATION INC.

81-4580473

Employer identification number

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS
ALL GRANTS AND DESIGNATED FUNDS ARE RESTRICTED FOR THE SPECIFIED SCHOOL(S)
PER THE REQUEST OF THE DONOR/GRANTOR. THE FUNDED SCHOOL RECEIVES THE ALL
KIDS BIKE KINDERGARTEN PE PROGRAM CONSISTING OF A FLEET OF 24 BALANCE-TO-
PEDAL BIKES, PEDAL CONVERSION KITS, FULLY ADJUSTABLE HELMETS, ONE TEACHER
INSTRUCTION BIKE, AN 8-LESSON CURRICULUM AND CONTINUED SUPPORT. THE
STRIDER EDUCATION FOUNDATION PROVIDES EVERYTHING NEEDED TO TEACH KIDS HOW
TO RIDE A BIKE. A FULL GRANT REPORT IS PROVIDED TO ALL GRANTORS WITH
INFORMATION ON THE NUMBER OF KIDS DIRECTLY IMPACTED BY THE GRANT. ALL
DONATIONS AND GRANTS ARE TRACKED BY A DONOR MANAGEMENT SOFTWARE AND
RECORDED ON FINANCIAL STATEMENTS THROUGH ACCOUNTING SOFTWARE.
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#### SCHEDULE L (Form 990)

(7) (8) (9)

#### **Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2022

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer Identification number STRIDER EDUCATION FOUNDATION INC. 81-4580473 Part ! Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified person and (d) Corrected? 1 (a) Name of disqualified person (c) Description of transaction organization Yes No (1)(2) (3) (4)(5) (6) 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (b) Relationship (c) Purpose of with organization loan (d) Loan (f) Balance due (g) In default? (h) Approved (i) Written to or from the oru? principal amount by board or agreement? committee? Yes No Yes No To From No Yes (6) (10)Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Type of assistance (e) Purpose of assistance person and the organization assistance (1) (2) (3) (5)(6)

Part IV Business Transactions Involving Interested Persons.

(a) Name of Interested person	(b) Relationship interested person	and the	(c) Amount of transaction			(e) S of e	haring org. nues?
	organizatio	n				Yes	No
(1) STRIDER SPORTS INTERNATIONAL	BUSINESS	OWNER	1,517,776				X
(2) STRIDER SPORTS INTERNATIONAL	BUSINESS	OWNER	-395,507			ES	X
(3) STRIDER SPORTS INTERNATIONAL	BUSINESS	OWNER	-37,200	RENT			X
(4)							
(5)							_
(6)							1
(7)							1
(8)							
(9)							_
10)							

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART V - ADDITIONAL INFORMATION

ALL EQUIPMENT UTILIZED FOR THE STRIDER EDUCATION FOUNDATION PROGRAMS

ARE PURCHASED FROM STRIDER SPORTS INTERNATIONAL AT WHOLESALE COST - THIS

CASH OUTFLOW IS REFLECTED AS "PRODUCT PURCHASE" ABOVE. THE AMOUNTS ARE

INCLUDED IN COSTS OF SALES AND GRANTS TO SCHOOLS IN THE FORM 990.

STRIDER SPORTS INTERNATIONAL PROVIDES IN-KIND DONATION OF MANAGEMENT

SERVICES TO ALLOW THE FOUNDATION TO CARRY OUT OUR MISSION AND GET MORE

KIDS ON BIKES. STRIDER SPORTS INTERNATIONAL WILL CONTINUE TO SUPPORT THE

FOUNDATION UNTIL SUCH TIME AS IT IS SELF-SUSTAINABLE - THIS IN-KIND

DONATION INFLOW IS REFLECTED AS "MANAGEMENT SERVICES" ABOVE. THESE DONATED

SERVICES ARE NOT INCLUDED IN THE FORM 990.

STRIDER SPORTS INTERNATIONAL PROVIDED IN-KIND DONATION OF RENT PER A LEASE

AGREEMENT - THIS IN-KIND DONATION INFLOW IS REFLECTED AS "RENT" ABOVE.

THESE DONATED RENT AMOUNTS ARE NOT INCLUDED IN THE FORM 990.

THE SECRETARY/TREASURER OF THE FOUNDATION IS THE PRESIDENT/OWNER OF STRIDER SPORTS INTERNATIONAL.

#### SCHEDULE M (Form 990)

#### **Noncash Contributions**

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

Attach to Form 990.

OMB No. 1545-0047
2022

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/Form998 for instructions and the latest information.

Open To Public Inspection

STRIDER EDUCATION FOUNDATION INC. 81-4580473 Part I Types of Property (a) (b) (d) Noncash contribution Check If Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Parl VIII, line 1g 1 Art - Works of art Art — Historical treasures Art — Fractional interests 4 Books and publications 5 Clothing and household goods Cars and other vehicles 68,000 QUALIFIED APPRAISAL 1 Boats and planes ..... 7 Intellectual property ..... 8 Securities — Publicly traded .... Securities — Closely held stock 10 11 Securities - Partnership, LLC, or trust interests ..... Securities — Miscellaneous ..... 12 Qualified conservation contribution — Historic structures ..... 14 Qualified conservation contribution — Other ..... 15 Real estate - Residential Real estate — Commercial .... 16 Real estate -- Other ..... 17 Collectibles 18 Food inventory 19 Drugs and medical supplies ... 20 Taxidermy 21 Historical artifacts Scientific specimens ...... 23 Archeological artifacts ..... 24 25 Other ( \_\_\_\_\_) 26 Other ( \_\_\_\_\_\_) 27 Other ( \_\_\_\_\_\_) 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? X 30a b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a X b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

describe in Part II.

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received or a combination of both. Also complete this part for any additional information.	er ed,
SCHEDULE M - SUPPLEMENTAL INFORMATION	. ,
THE DONATED MOTORCYLE WAS USED FOR PROMOTIONS AND FUNDRAISING EFFORTS	
THROUGHOUT 2022 AND PART OF 2023.	
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#### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ. Go to www.lrs.gov/Form990 for the latest information. OMB No. 1545-0047 2022

Open to Public Inspection

Name of the organization STRIDER EDUCATION FOUNDATION INC.

Employer Identification number 81-4580473

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES
THE STRIDER EDUCATION FOUNDATION MISSION IS TO TEACH EVERY CHILD IN AMERI
HOW TO RIDE A BIKE IN KINDERGARTEN PE CLASS. LEARNING TO RIDE A BIKE IS
DEVELOPMENTAL MILESTONE IN A CHILD'S LIFE. THE ABILITY TO RIDE IMPROVES
LIFE GREATLY WHILE DEVELOPING BALANCE, MOBILITY, SAFETY, AND EXERCISE TO
BUILD A HEALTHY LIFESTYLE.
FORM 990 - ORGANIZATION'S MISSION
THE STRIDER EDUCATION FOUNDATION CARRIES OUT THE MISSION TO TEACH EVERY
CHILD IN AMERICA HOW TO RIDE A BIKE IN KINDERGARTEN PE CLASS. WE BELIEVE
THAT LEARNING TO RIDE A BIKE IS A DEVELOPMENTAL MILESTONE. OUR GOAL IS
TO GET KIDS OUTSIDE, GIVING THEM CONFIDENCE AND A SENSE OF INDEPENDENCE,
GETTING THEM OFF COMPUTER SCREENS, AND DOING SOMETHING THAT THEY CAN
CONTINUE THROUGHOUT THEIR LIVES. WE ARE PASSIONATE ABOUT GIVING THE
OPPORTUNITY TO LEARN TO RIDE A BIKE TO ALL CHILDREN, REGARDLESS OF THEIR
SOCIOECONOMIC STATUS.
FORM 990, PART I, LINE 6
AMBASSADORS/VOLUNTEERS BUILD AND DELIVER THE BIKES AND PROMOTE THE MISSION
WITHIN THEIR COMMUNITIES. THEY ARE TRULY AMBASSADORS TO HELP MORE KIDS GET
ON TWO WHEELS AND GAIN THE CONFIDENCE OF LEARNING TO RIDE A BIKE.
FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT
THE STRIDER EDUCATION FOUNDATION ACCOMPLISHES ITS MISSION OF TEACHING
CHILDREN HOW TO RIDE A BIKE THROUGH ONE MAIN PROGRAM. ALL KIDS BIKE IS A For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  Schedule O (Form 990) 2022

STRIDER EDUCATION FOUNDATION INC.

NATIONAL MOVEMENT TO PLACE LEARN-TO-RIDE PROGRAMS INTO KINDERGARTEN
PE CLASSES IN PUBLIC SCHOOLS ACROSS THE NATION WITH DONATIONS AND
PARTNERSHIPS FROM INDIVIDUALS, BUSINESSES, AND ORGANIZATIONS. THE
FOUNDATION WAS ORGANIZED IN 2017, RECEIVING OUR 501(C)(3) STATUS.
IN 2018, A FORMAL KINDERGARTEN PE CURRICULUM WAS CREATED FOR A MORE
STRUCTURED PROGRAM, AND THE ALL KIDS BIKE INITIATIVE WAS DEVELOPED. 37
PROGRAMS WERE DELIVERED IN 2018. IN 2019, WE CONTINUED TO GROW AND
DELIVERED 98 PROGRAMS. IN 2020, WORD SPREAD ABOUT OUR PROGRAM AND THE
POSITIVE BENEFITS OF HAVING A LEARN-TO-RIDE BIKE CURRICULUM IN A PUBLICSCHOOL PE CLASS, AND WE DELIVERED 126 PROGRAMS. IN 2021, WE DELIVERED 184
PROGRAMS. IN 2022, WE DELIVERED 379 PROGRAMS. TO DATE, THE STRIDER
EDUCATION FOUNDATION HAS DELIVERED OVER 900 PROGRAMS IN ALL 50 STATES AND
IMPACTS OVER 100,000 STUDENTS ON AN ANNUAL BASIS.

FORM 990, PART VI, LINE 3 - MANAGEMENT DELEGATED

A 5-MEMBER BOARD OF DIRECTORS HAS THE AUTHORITY OVER THE STRIDER EDUCATION
FOUNDATION. AN EXECUTIVE DIRECTOR IS DELEGATED TO MANAGE THE DAY-TO-DAY
OPERATIONS OF THE FOUNDATION AND OVERSEES ALL STAFF. THE
SECRETARY/TREASURER OF THE STRIDER EDUCATION FOUNDATION IS ALSO THE
PRESIDENT/OWNER OF STRIDER SPORTS INTERNATIONAL AND PROVIDES MANAGEMENT
SUPPORT TO THE EXECUTIVE DIRECTOR AND THE BOARD OF DIRECTORS. STRIDER
SPORTS INTERNATIONAL DONATES A MAJORITY OF THE STAFF SALARIES AS AN IN-KIND
DONATION TO THE FOUNDATION.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE FORM 990 IS PREPARED BY A QUALIFIED CPA AND REVIEWED BY THE
FOUNDATION'S EXECUTIVE DIRECTOR. A COPY IS PROVIDED TO ALL BOARD MEMBERS

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STRIDER EDUCATION FOUNDATION INC.

FOR THEIR REVIEW, AND FORMAL ACTION OF APPROVAL IS TAKEN AT A BOARD MEETING PRIOR TO THE IRS FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

AT THE BEGINNING OF EACH CALENDAR YEAR, EACH BOARD MEMBER REVIEWS AND SIGNS

A CONFLICT OF INTEREST STATEMENT. THEY AGREE TO THIS POLICY AND UNDERSTAND

THAT THEY ARE RESPONSIBLE FOR MONITORING AND STATING ANY CONFLICTS AT EACH

BOARD MEETING PRIOR TO A VOTE ACTION. ANY INDIVIDUAL WITH A CONFLICT IS

ASKED TO RECUSE THEMSELVES FROM VOTING ON THE MATTER RELATED TO THE

CONFLICT. THE BOARD'S POLICY IS TO ENSURE TRANSPARENCY AND EFFICACY OF

ALL MATTERS AND ESPECIALLY THE DEALINGS AND RELATIONSHIPS WITH STRIDER

SPORTS INTERNATIONAL.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

NO BOARD MEMBERS ARE COMPENSATED FOR THEIR SERVICES. THE EXECUTIVE

DIRECTOR IS THE TOP MANAGEMENT OFFICIAL. HER SALARY IS BASED ON A REVIEW

OF COMPARABLE MARKET DATA AND CLEARLY DOCUMENTED. 20% OF THE SALARY IS

PAID BY THE FOUNDATION, AND 80% IS PAID BY STRIDER SPORTS INTERNATIONAL AND

DONATED AS AN IN-KIND DONATION TO THE STRIDER EDUCATION FOUNDATION.

FORM 990, PART VI, LINE 17 - OTHER STATES WHERE COPY OF RETURN IS FILED

NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEW YORK, OKLAHOMA, OREGON,

PENNSYLVANIA, SOUTH CAROLINA, TENNESSEE, UTAH, VIRGINIA, WASHINGTON,

WISCONSIN, WEST VIRGINIA

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE FOUNDATION HAS A POLICY TO ENSURE TRANSPARENCY, CREDIBILITY, AND

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Employer identification number

ACCOUNTABILITY. WE REVIEW ALL PUBLIC REQUESTS FOR INFORMATION UPON
RECEIPT. OUR 501(C) (3) DETERMINATION LETTER IS AVAILABLE ON OUR WEBSITE.
FORMS TO REQUEST OUR MOST RECENT TAX RETURN AND TO CONTACT US WITH ANY
OTHER QUESTIONS ARE AVAILABLE ON OUR WEBSITE.

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