Form **990**

Department of the Treasury Internal Revenue Service

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.

Go to www.irs.gowForm990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

A For th	ne 2023 calendar year, or tax year beginning and ending		1	
B Check if	applicable: C Name of organization		D Employe	r identification number
Address	change STRIDER EDUCATION FOUNDATION INC.			
Name ch	Doing business as			580473
H	Number and street (or P.O. box if mail is not derivered to street address)	Room/suite	E Telephor	
Initial ret			003-	956-3877
Final retu	of a second seco			
	RAPID CITY SD 57702		G Gross re	ceipts 2,579,472
Amended	F Name and address of principal officer:	H(a) is this a g	mun colum for	subordinates Yes X No
Application	m pending LISA WEYER	riden is mis a A	loup leadin loi	
	2221 N PLAZA DRIVE	H(b) Are all su	ibordinates in	oluded? Yes No
	RAPID CITY SD 57702	If "No	," attach a lis	L See instructions
I Toy-eye	emot status: X 501 c 3 501 c () insert no.) 4947(a 1) or 527			
J Website	THE STREET AND	H(c) Group ex	emetton numi	har
		Year of formation: 2		M State of legal domicile: SD
	Summary	Tool of loningson,		W Older of regal conficie.
Part I				
	Briefly describe the organization's mission or most significant activities:			
ğ	SEE SCHEDULE O	s · · · · · · · · · · · · · · · · · · ·		
2			,	
9	·			
	Check this box if the organization discontinued its operations or disposed of more than			**
තේ 3	Number of voting members of the governing body (Part VI, line 1a)		. 3	5
	Number of independent voting members of the governing body (Part VI, line 1b)			4
	Total number of Individuals employed in calendar year 2023 (Part V, line 2a)			5
ਤੂੰ ਨੂੰ	Total number of volunteers (estimate if necessary)			125
⋖ 70	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
	Net unrelated business taxable income from Form 990-T, Part 1, line 11			0
- 0	Net unrelated business taxable mounte from 1990-1, Part 1, line 11	Prior Ye	er in	Current Year
	Contributions and grants (Part VIII, line 1h)	2.06	6,954	1,748,960
9 0			.,	0
ē ,	Program service revenue (Part VIII, line 2g)			26,511
	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	20	E 700	
_ 11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,790	101,367
	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,744	1,876,838
	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,26	0,746	913,314
14	Benefits paid to or for members (Part IX, column (A), line 4)			0
<u>ო</u> 15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5	8,669	44,252
5 15 16a b	Professional fundraising fees (Part IX, column (A), line 11e)			0
B b	Total fundraising expenses (Part IX, column (D), line 25) 399,058			
<u>й</u> ₁₇	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	19	1,009	580,767
	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,51	0,424	1,538,333
1	Revenue less expenses, Subtract line 18 from line 12		2,320	338,505
5 8	Revenue less expenses, outpeace time to nom line 12	Beginning of Co		End of Year
용된 20	Total assets (Part X, line 16)		1,781	2,649,941
			1,276	1,420,930
	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		0,505	1,229,011
-II 22		0.5	0,505	1,223,011
Part I				
Under p	enalties of perjury, I declare that I have examined this return, including accompanying schedules and si rect, and complete. Declaration of preparer (other than officer) is based on all information of which pre	atements, and to t	he best of n	ny knowledge and belief, it is
true, cor	rect, and complete. Declaration of preparer (other than officer) is based on all information of which pre-	parer nas any kno	wieuge.	
Sign	Signature of officer		Date	
Here	LISA WEYER EXECUTIVE	DIRECTO	OR	
	Type or print name and title			
	Print/Type preparer's name Preparer's signature	Date	Check	if PTIN
Paid	JEANKITE SCHROEDER, CPA		self-er	mployed P00479382
Preparer	THE PROPERTY OF THE		Firm's EIN	46-0257538
Use Only) jii/ 3 manie		. JANE MIT	
3-0 Gill)	DADED GIME OD 57709-2140		Uhana aa	605-342-5630
			Phone no.	
	IRS discuss this return with the preparer shown above? See Instructions			
For Paper	rwork Reduction Act Notice, see the separate instructions.			Form 990 (2023)

m 990 (2023) STRIDER EDUC	ATION FOUNDATI	ON INC.	81-4580473		Page 2
Part III Statement of Progra	am Service Accomplis	hments			X
	contains a response or	note to any lir	ne in this Part III		25
Briefly describe the organization's mi	ission:				
SEE SCHEDULE O				. 96 9	51.55 SEC. 11 11
					= €
					5765
Did the organization undertake any si	inniferrat program condens di	uring the year whi	ich were not listed on the	<u> </u>	
				,	Yes X No
prior Form 990 or 990-EZ?					
If "Yes," describe these new services Did the organization cease conducting	i un acreuule C. In or make significant change	es in how it condu	icts any program		
-					Yes X N
services? If "Yes," describe these changes on \$	Schadula O			6	
Describe the organization's program	service accomplishments for	each of its three	largest program services	, as measured by	
expenses. Section 501(c)(3) and 501	(cV4) organizations are requi	red to report the	amount of grants and all	ocations to others,	
the total expenses, and revenue, if a	nv for each program service	reported			
the total expenses, and revenue, it at	ity, for edon program our nee				
la (Code:) (Expenses \$	1,050,210 includi	ing grants of \$	913,314	(Revenue \$	151,308
SEE SCHEDULE O				. 5	
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b (Code:) (Expenses \$	includ	ing grants of\$	S. 18) (Revenue \$	O(** *****)C
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c (Code:) (Expenses \$	includ	ling grants of\$	3) (Revenue \$	
N/A					
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	-1074				
ld Other program services (Describe o	n Schedule O.)) (Revenue \$		

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Form **990** (2023)

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Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? See instructions 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X candidates for public office? If "Yes," complete Schedule C, Part I 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) X election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 5 X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If X 6 "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X 8 complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV X Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V X 10 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 10? If "Yes," X 11a complete Schedule D, Part VI b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167 if "Yes," complete Schedule D, Part VII X 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 X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X 11d X Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or X for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on X Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on X 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? If "Yes," complete Schedule G, Part III X 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 1? if "Yes," complete Schedule I, Parts I and II 21

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Yes	s N
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-	+
24a	
24b	+
	+
24c	
24d	+
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	Τ.
	-1
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20	+
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28a X	-
28b	+
28c X	,
29	+
30	-
31	+
	- 11
32	+
33	+
34	
35a	+
	- 11
35b	+
36	
37	+
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Yes	es l
1c	
	c Form 9

Form	990 (2023) STRIDER EDUCATION FOUNDATION INC. 51-45604				- 5	age T
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (confi	inue	(d)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		_			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	5			
b	If at least one is reported on line 2a, dld the organization file all required federal employment tax retu	ms?	2 2	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0.		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	auth	ority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	al ac	count)?	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 Financial	Acce	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 transaction					X
C	If "Yes" to line 5a or 5b, dld the organization file Form 8886-T?			5c		
6а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	he				
	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 contribution					
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).		2000			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	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 w					
•	required to file Form 8282?		0	7c		х
d		7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contr	act?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	atlon	file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain					
•				8		
9	Sponsoring organizations maintaining donor advised funds.					
a				9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
a		10a				
b		10b				
11	Section 501(c)(12) organizations. Enter:			_		
a		11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources					
		11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		041?	12a		
b		12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	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					
-	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?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remun	eratio	on or			
	excess parachute payment(s) during the year?			15		x
	If "Yes." see instructions and file Form 4720, Schedule N.					
16	s the organization an educational institution subject to the section 4968 excise tax on net investment	nt inc	ome?	16		X
. •	if "Yes," complete Form 4720, Schedule O.		191			
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any ac	tiviti	es			
• •	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			. 17		
	If No. 2 complete Form 6060		1100 O 10 11 100 11 10			

Form **990** (2023)

State the name, address, and telephone number of the person who possesses the organization's books and records.

2221 N PLAZA DRIVE

SD 57702

605-956-3877

LISA WEYER

RAPID CITY

	2023 STRIDER EDUCATION FOUNDATION INC. 81-4580473	Page
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	Employees, and
	Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	r ii 5g.:- 📙
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 received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
 See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	box	, unle	Positheck essiper end a c	rson i	than c s both oritust	(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 employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-MEC)	from the organization and related organizations
(1) LISA WEYER EXECUTIVE DIRECTOR	40.00			x				17,806	o	0
(2) JACK LYNASS PRESIDENT	0.25	x		x				0	0	O
(3) ROD WOODRUFF	0.25									
VICE PRESIDENT (4) RYAN MCFARLAND	0.00	X		X				0	0	0
SECRETARY/TREASURER (5) RENE CREED	0.00	X		X				0	0	0
BOARD MEMBER (6) BRIAN KLOCK	0.25 0.00 0.25	X						0	0	0
BOARD MEMBER (7)	0.00	x						0	0	0
(8)	#!									
(9)										
	864 11164									
(10) 12 W. d										
(11)	• Dallo									

Par	t VII Section A. Officer	s, Directors, Ti	uste	:es,		C)	npio	rees	, and Highest Compens	ateu Emproyees (Continue	nuj		
	(A) Name and title	(B) Average hours	box	c, unte	Pos heck iss pe	ition more erson	than is both or/trus	an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related	Estimate of	(F) ed amou other ensation	nt
		per week (list any hours for related organizations below dotted line)	or director	Institutional trustee	erriployee Key employee Officer Institutional trustee		Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	fro	m the ation an	
(12)		-2.40.000											
(13)													
(14)	· 6 · 6 · 10 g · 11 · 11												
(15)													
(16)	E 16 10.00 ×	(e)											
(17)	n sayyer												
(18)													
(19)	%												
1b c	Subtotal	eets to Part VII	, Se	ctio	n A				17,806				
2	Total number of individuals (i reportable compensation from	ncluding but not	ilmit	ted to	o the	ose I	listed	ab					
3 4	Did the organization list any fi employee on line 1a? If "Yes, For any individual listed on line organization and related orga- individual	ionmer officer, d "complete Schene 1a, is the sur anizations greate	lirect eduk n of er tha	tor, to J for reportan \$	or so Intab 150,	ile co	indivi ompe ? If "	idua ensa Yes,	/ tion and other compensati " complete Schedule J for	on from the such	3		X X
5	for services rendered to the	organization? If	"Yes	."∞	mple	ete S	Sche	dule	J for such person		. 5		X
Secti 1	on B. Independent Contract Complete this table for your compensation from the organ	five highest com	pen	sateo	i Ind	lepe	nder	t co	endar year ending with or t	within the organization's tax	c year.		
	Name an	(A) d business address						+	Descr	(B) intton of services		Compen	sation
2	Total number of independent	t contractors (inc	ludir	ng bi	ut no	ot lin	nited	to t	hose listed above) who	0			
DAA	received more than \$100,000	or compensation	un ri	Orn 1	urie (orga	mzat	ıŲΠ		<u> </u>	F	orm 99	0 (202:

_	OHOOK II	Jon Journal O	JOHNAMI O	a response or note	(A)		(C)	(0)
					Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
1a	Federated camp	paigns	1a					
	Membership du		1b					
c	Fundraising eve	nts	1c			1		
ď	Related organiz	ations	1d					
	Government grants (c		1e	323,600				
f	All other contributions, and similar amounts n	gifts, grants,	***	1,425,360				
9	Noncesh contributions	included in						
	fines 1a-1f				1,748,960			
n	I otal. Add ines	18-11	414124444	Business Code	27.10,500			
2a								
D								
C		111111111111111111111111111111111111111						
d	=							
е								
_	All other program							
g	Total. Add lines	2a–2f						
3	investment inco							
	other similar an	ounts)			26,511			26,511
4	Income from inv	estment of tax-	exempt bond	proceeds				
5	Royalties							
		(1)	Real	(ii) Personal				
6a	Gross rents	6a						
	Less: rental expenses							
	Rental inc. or (loss)	6c						
	d Net rental income or (loss)							
7a	Gross amount from (1) Securi			(ii) Other				
	sales of assets		(4)					
	other than inventory	10						
D	Less: cost or other	-						
	basis and sales exps.							
	Gain or (loss)	76		l				
	Net gain or (los	•						
8a	Gross income from							
	(not including \$							
	of contributions re							
	1c). See Part IV, I							
	Less: direct exp							
			aising event	s ,,				
9a	Gross income f							
	activities. See P	art IV, line 19	9a	18,060				
þ	Less: direct exp	enses	9b	68,000				
C	Net income or	loss) from gami	ng activities		-49,940			-49,940
	Gross sales of							
	returns and allo		10a	785,941				
Ь	Less: cost of go		10b	634,634				
			-		151,307	151,307		
				Business Code				
11a								
ı id	***							
-								
C								
	All other revenu							
					1 076 030	151,307	0	-23,429
12	T-fol	. See instruction	S		1,876,838	171,70/	U	-43,449

_	Check if Schedule O contains a respon			(6)	(C)
	ot include amounts reported on lines 6b, b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(O) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	913,314	913,314		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		0 564	15 604	2 561
	trustees, and key employees	17,806	3,561	10,684	3,561
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		00.600		
7	Other salaries and wages	22,639	22,639		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits		0.676	000	200
10	Payroll taxes	3,807	2,679	819	309
11	Fees for services (nonemployees):				
а	Management				
	Legal			46 454	
С	Accounting	46,454		46,454	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				220 111
	(A) amount, list line 11g expenses on Schedule O.)	339,111	21 066		339,111
12	Advertising and promotion	59,030	51,266	30 455	7,764
13	Office expenses	19,457	0.001	19,457	0.465
14	Information technology	13,667	2,901	2,301	8,465
15	Royalties			0.000	
16	Occupancy	37,200	27,900	9,300	20.202
17	Travel	50,505	20,202		30,303
18	Payments of travel or entertainment expense				
	for any federal, state, or local public officials	- 4 - 5	m 4 m m	F 0	
19	Conferences, conventions, and meetings	5,467	5,417	50	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	001	221		
23	Insurance	331	331		
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.)	0 545			0 545
а	EVENTS	9,545			9,545
b					
C					
d					
9	* *************************************		1 050 010	00 065	200 050
25	Total functional expenses. Add lines 1 through 24e	1,538,333	1,050,210	89,065	399,058
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check hen if				
	following SOP 98-2 (ASC 958-720)				Form 990 (2023

		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	764,999	1	2,551,604
	Savings and temporary cash investments		2	
	Pledges and grants receivable, net	61,580	3	28,000
	Accounts receivable, net	6,229	4	67,545
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		5	
	Loans and other receivables from other disqualified persons (as defined			
1	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	68,973	9	2,792
	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
Ь	Less: accumulated depreciation 10b		10c	
11	Investments—publicly traded securities		11	
12	Investments—other securities. See Part IV, line 11		12	
	Investments—program-related. See Part IV, line 11		13	
	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
	Total assets. Add lines 1 through 15 (must equal line 33)	901,781	16	2,649,941
_	Accounts payable and accrued expenses	11,276	17	126,530
	Grants payable		18	
	Deferred revenue		19	1,294,400
20	Tax-exempt bond liabilities		20	
	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
00	Loans and other payables to any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
	Unsecured notes and loans payable to unrelated third parties		24	
	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D		25	
	Total liabilities. Add lines 17 through 25	11,276	26	1,420,930
1	Organizations that follow FASB ASC 958, check here X			***************************************
	and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	492,744	27	694,200
	Net assets with donor restrictions	397,761	28	534,811
	Organizations that do not follow FASB ASC 958, check her			
:	and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds		31	
29 30 31 32	Total net assets or fund balances	890,505	32	1,229,011
- 17	Total liabilities and net assets/fund balances	901,781	33	2,649,941

Form **990** (2023)

Form	990 (2023) STRIDER EDUCATION FOUNDATION INC. 81-4580475			ra	ge IZ
Pa	rt XI Reconciliation of Net Assets				-
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,87		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,53		
3	Revenue less expenses. Subtract line 2 from line 1	3			505
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	89	0,!	505
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			1
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	1,22	9,,	011
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Ш.
			,	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.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	if "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
¢	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?		2¢	X	_
	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 Guidance, 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				
			Ear	. aar	U tanaa

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Schedule A (Form 990) 2023

Employer Identification number Name of the organization STRIDER EDUCATION FOUNDATION INC. 81-4580473 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(bx) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (II) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (I) Name of supported (described on lines 1-10 sted in your governing support (see other support (see organization above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

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

STRIDER EDUCATION FOUNDATION INC. 81-4580473

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Schedule A (Form 990) 2023
Part II Support

Sec	tion A. Public Support										
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total				
1	Gifts, grants, contributions, and rnembership fees received. (Do not include any "unusual grants.")	467,024	658,696	894,942	1,766,954	1,748,960	5,536,576				
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	467,024	658,696	894,942	1,766,954	1,748,960	5,536,576				
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						766,054				
	shown on line 11, column (f) Public support. Subtract line 5 from line 4.						4,770,522				
Sec	tion B. Total Support						.,,				
_	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total				
7	Amounts from line 4	467,024	658,696	894,942	1,766,954	1,748,960	5,536,576				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	201,722				26,511	26,511				
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.)						5,576,131				
11	Total support. Add lines 7 through 10	for a looke eliene)				12	1,265,010				
12 13	Gross receipts from related activities, etc 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)					
Car	organization, check this box and stop he tion C. Computation of Public	Support Porce	ntano								
	Public support percentage for 2023 (line	Support reite	Islaye	on (f)\		14	85.55%				
14	Public support percentage for 2023 (line of Public support percentage from 2022 Sch						87.23 %				
15	33 1/3% support test — 2023. If the org	reduite A, Falt II, III	eck the box on lin	e 13 and line 14	is 33 1/3% or mor		0712070				
16a	box and stop here. The organization qui						X				
ь	33 1/3% support test — 2022. If the org	ranization did not d	neck a box on line	13 or 16a, and lin	ne 15 is 33 1/3% o	r more, check					
	this box and stop here. The organization										
17a	10%-facts-and-circumstances test —	2023. If the organiz	ation did not chec	k a box on line 13	, 16a, or 16b, and	line 14 is					
114	10% or more, and if the organization me	ets the facts-and-ci	rcumstances test,	check this box an	d stop here. Expl	ain in					
	Part VI how the organization meets the t	facts-and-circumstar	nces test. The org	anization qualifies	as a publicly supp	ported					
	organization						🗀				
b	10%-facts-and-circumstances test —	2022. If the organia	zation did not chec	k a box on line 13	3, 16a, 16b, or 17a	, and line					
	15 is 10% or more, and if the organization	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 th	e facts-and-circums	tances test. The o	organization qualifi	ies as a publicly s	upported	_				
	organization						L				
18	Private foundation. If the organization of	did not check a box	on line 13, 16a, 1	6b, 17a, or 17b, c	heck this box and	see					
	instructions			a							
_							A (Form 990) 2023				

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

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

	tion A. Public Support							
Caler	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023		(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total, Add lines 1 through 5						-	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
	Add lines 7a and 7b						+	
8	Public support. (Subtract line 7c from							
Sac	tion B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023		(f) Total
9	Amounts from line 6	V -7	1					
10a	Gross income from interest, dividends, payments received on securities loans, rents,							
	royalties, and income from similar sources .						-	
Ь	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
C	Add lines 10a and 10b						4	
11	Net Income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						1	
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,							
14	and 12.) First 5 years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax ve	ear as a section 50)1(c)(3)	_	· ·
17	organization, check this box and stop he			, 0,				
Sec	tion C. Computation of Public		entage					
15	Public support percentage for 2023 (line	8, column (f), divi	ded by line 13, co				15	%
16	Public support percentage from 2022 Sch						16	%
Sec	ction D. Computation of Investn							
17	Investment income percentage for 2023						17	%
18	Investment income percentage from 2022	Schedule A, Part	III, line 17		461		18	%
19a	33 1/3% support tests — 2023. If the o						3	
	17 is not more than 33 1/3%, check this I 33 1/3% support tests — 2022. If the o	oox and stop net	e. The organization	un quannes as a p line 14 or line 10s	and line 18 ic ma	organization ne than 33 1/30	L arv	,
Ь	ine 18 is not more than 33 1/3%, check to	ryanızadon dio no rhie hox and eton	here. The organi	ization qualifies as	a publiciv suppor	ted omanization	v, ant 1	·
20	Private foundation. If the organization of	did not check a he	ox on line 14. 19a.	or 19b, check thi	s box and see insi	ructions		
70	I HAME IORIGINATION IN THE AMERICAN					-		

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Part IV Supporting Organizations

(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.)

Sect	ion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		-
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	-6		-
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity	_		
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	_	-
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			
	7? If "Yes," complete Part I of Schedule L (Form 990).	8	_	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons, as defined in section 4946 (other than foundation managers and organizations	0.		
	described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	_	
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which	a.		
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		-
C	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	0.0		
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		-
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	10a		
	supporting organizations)? If "Yes," answer line 10b below.	Iva		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10ъ		
	CHARLETTERM DECORDED TO BE THE PROPERTY OF CHARLET AND THE PROPERTY OF THE PRO	1.40		

determine whather the organization had excess business holdings.)

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	1 1		
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,			
O = =41	provide detail in Part VI.	11c		
Secu	on 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		162	140
1	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,	1 1		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	1 1		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	1 1		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1 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	-		
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	1 1		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	1 1		
	supervised or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
0000	on or approved the second		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	1 1		
	or management of the supporting organization was vested in the same persons that controlled or managed	1 1		
	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	1 1		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1 1		
	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			
	supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ms).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete Ilne 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	ISI/UGIU	Yes	No
2	Activities Test. Answer lines 2a and 2b below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		169	140
а	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		
	and the second s			
b	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		
2	Parent of Supported Organizations. Answer lines 3a and 3b below.			
3	The second of the second to second to second the second the second to second the second to second the second			
а	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	many the first appropriate and admitted degree of dispetion gives the policine programs, and activities of each			
U	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	Co.h	adula A	/Form 6	990) 202:

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

6

Schedule A (Form 990) 2023

emergency temporary reduction (see instructions).

see instructions).

Secti	on D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exemp	Lourposes		1	
	Amounts paid to perform activity that directly furthers exempt p				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purposes	of supported organizations		3	
	Amounts paid to acquire exempt-use assets	- Military and the second seco		4	
5	Qualified set-aside amounts (prior IRS approval required—prov	vide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	organization is responsive		8	
•	(provide details in Part VI). See instructions.				
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	mile e miles it stripes by the comment	(1)	(ii)		(III)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution	ons	Distributable
	, ,		Pre-2023		Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023				
	(reasonable cause required-explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
	From 2019				
C	From 2020				
d	From 2021				
	From 2022				
	Total of lines 3e through 3e				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Carryover from 2018 not applied (see instructions)				
ì	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from				
-	Section D, line 7:				
а	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder, Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
_	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
•	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

DAA

Schedule A (Form 990) 2023

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047 2023 Open to Public Inspection

Employer Identification number

STR	DER EDUCATION FOUNDATION INC.			580473
Part 1		unds or Other Similar Funds n Form 990, Part IV, line 6.		
	Complete it the digental and the state of th	(a) Donor advised funds	(1) Funds and other accounts
1 Tot	al number at end of year			
	pregate value of contributions to (during year)			
	pregate value of grants from (during year)			
	pregate value at end of year			
5 Did	the organization inform all donors and donor advisors in writing the	nat the assets held in donor advised		
	ds are the organization's property, subject to the organization's ex			Yes N
6 Did	the organization inform all grantees, donors, and donor advisors	in writing that grant funds can be used		
onl	y for charitable purposes and not for the benefit of the donor or do	onor advisor, or for any other purpose		
	ferring impermissible private benefit?			Yes No
Part				
1 Pu	pose(s) of conservation easements held by the organization (che	ck all that apply).	h. t	4 laud
Н	Preservation of land for public use (for example, recreation or ed			
	Protection of natural habitat	Preservation of a certified	nisione su	ucture
\sqcup	Preservation of open space			
	mplete lines 2a through 2d if the organization held a qualified con	servation contribution in the form of a co	onservation	
	sement on the last day of the tax year.		0.	Held at the End of the Tax Ye
	al number of conservation easements			
	al acreage restricted by conservation easements			
c Nu	mber of conservation easements on a certified historic structure in	icluded on line Za	2c	
	mber of conservation easements included on line 2c acquired after		0.4	
on	a historic structure listed in the National Register		2d	des He
3 Nu	mber of conservation easements modified, transferred, released,	extinguished, or terminated by the orga	nization di	ang me
	year			
4 Nu	mber of states where property subject to conservation easement	is located		
	es the organization have a written policy regarding the periodic m			Пу П м
vio	lations, and enforcement of the conservation easements it holds?			Yes N
6 Sta	iff and volunteer hours devoted to monitoring, inspecting, handling	g or violations, and enlotority conservation	on easenk	anus duning inte year
7 An	nount of expenses incurred in monitoring, inspecting, handling of	violations, and enforcing conservation ea	asements	during the year
	es each conservation easement reported on line 2d above satisfy	the requirements of section 170(h)(4)(l	BYi)	
	d section 170(h)(4)(B)(ii)?		-)(1)	Yes No
an o t	Part XIII, describe how the organization reports conservation ease	ements in its revenue and expense state	ement and	
מו פ	eet, and include, if applicable, the text of the footnote to the organ	nization's financial statements that descr	ibes the	
SII	panization's accounting for conservation easements.			
Part		rt. Historical Treasures, or O	ther Sim	ilar Assets
rait	Complete if the organization answered "Yes" of	on Form 990, Part IV, line 8.		
4- 15	he organization elected, as permitted under FASB ASC 958, not t	to report in its revenue statement and ba	alance she	et works
na n	art, historical treasures, or other similar assets held for public ext	hibition, education, or research in further	ance of pu	blic
01	rvice, provide in Part XIII the text of the footnote to its financial sta	atements that describes these Items.	•	
la 16 :	the organization elected, as permitted under FASB ASC 958, to re	port in its revenue statement and balan	ce sheet v	rorks of
D 11	historical treasures, or other similar assets held for public exhibit	tion, education, or research in furtheran	ce of publi	c service.
	ovide the following amounts relating to these items.	,,		,
	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
2 (11	he organization received or held works of art, historical treasures,	or other similar assets for financial cali	n. provide	the
2 if	ine organization received of field works of all, fishing a features, lowing amounts required to be reported under FASB ASC 958 rel	lating to these items.	., p	
	•			\$
	evenue included on Form 990, Part VIII, line 1			* + +++++
a R	sets included in Form 990, Part X			\$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Continued	Sched	dule D (Fo	om 990) 2023	STRIDER	EDUCATION	FOUNDATION	INC.	81-	45804	73			ge 2
collection items (check at livet apply). a Public exhibition d Loan or exchange program b Schrolarly research e Other Presvention for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization's solicitions of art, historical treasures, or other similar assesses to be sold to rate further and to be maintained as part of the organization's collection's Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an armount on Form 990, Part IV, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part IV 1b "f"se", explain the arrangement in Part XIII and complete the following table. C Beginning belance C Beginning belance C Beginning belance G Additions during the year e Bishibutions during the year 1 1 Entiting belance 1 1 Fireting belance 1 Fireting belance	Pa	rt III	Organizatio	ons Maintaini	ng Collections	of Art, Historical	Treasure	es, or	Other S	Similar Ass	sets (co	ntinu	red)
b Scholarly research e Other	3	Using the collection	organization's items (check a	acquisition, acces	sion, and other reco	rds, check any of the f	following that	t make	significant	use of its			
b Scholarly research e Other	a	Public	c exhibition		aП	Loan or exchange pro	ogram						
Preservation for future generations					ěН								
Amount a beginning balance Beginning balance Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part V, line 21. Beginning balance Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 21. Is to the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 21. Is to the organization an agent, trustee, ousfodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is the organization an agent, trustee, ousfodian or other intermediary for contributions or other assets not include an amount on Form 990, Part X, line 21, for eacons or other assets not include an amount on Form 990, Part X, line 21, for eacons or ousfodial account liability? Amount 1c		_	-	ire cenerations	ں -			• • • • • • •					
Sull Sull Sull Survey Addition Sull S					collections and expl	ain how they further th	e organizati	on's exe	empt pumo	se in Part			
Source S			a description of	nie Organizations	Collections and Capi	aut non uncy randict at	o organizaci	one one	siripe purpe	no in r die			
sasets to be sold to rake funds rather than to be maintained as part of the organization?			مطلا امثام ممسم		a ar manhin donation	o of art historical tenar	nume or off	or cimil	25				
Escrow and Custodial Arrangements	5	Dunng th	e year, did the	organization solic	t or receive donation	is of all, historical freat	sules, ul uli inn'n collecti	2	aı		□ v.	. 🗆	Ma
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, tustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No 1/Yes, 'explain the arrangement in Part XIII and complete the following table. Amount 1/2						s part of the organizati	ons conecu	OHP			10	5	NO
990, Part X, line 21. 1a is the organization an agent, trustate, custodian or other intermediary for contributions or other assets not included on Form 960, Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table. C Beginning balance	ra	rt IV	Complete if	iu Custoulai /	an angulation "V	no" on Form 990	Dart IV li	ne Q	or report	ed an amo	unt on i	Corr	
Included on Form 1990, Part X? If Yes, "explain the arrangement in Part XIII and complete the following table. Beginning balance Amount Additions during the year Distributions during the year Ending balance Distributions during the year Ending balance Distributions during the year Ending balance Distributions during the year End Distributions Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Endowment Endowment End of year balance Permonent endowment Endowm			990, Part X	, line 21.						eu an amo	unt on	OIIII	
b if "Yes," explain the arrangement in Part XIII and complete the following table. C Beginning balance	1a	is the org	ganization an ag	gent, trustee, cust	odian or other interm	ediary for contributions	or other as	ssets no	t				
a Beginning balance		included	on Form 990, F	Part X?						2. ***** (10) - ***	Ye	s 📗	No
c Beginning balance	b	If "Yes,"	explain the ama	ngement in Part X	(III and complete the	following table.							
d Additions during the year Distributions during the year Distribution or grantzation include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Distribution or Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Distributions Distribution Distribu											Amount		
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e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b if "Yes," sxt.lain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses c Ket investment earnings, gains, and losses d Grants or scholarships e Ofter expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quask-endowment										1d			
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(ii) Unrelated organizations? (iii) Related organizations? (iii) Cast or oliver basis (color oliver basis (3 a			ings not in the bo	ssession of the organ	iizaucii iilat ale neki a	IN AUTIII ISO	C160 101	uic		r	Vac	No
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b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other			-									-	_
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (investment) (investme												-	
Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (investment) (investment) (b) Cost or other basis (c) Accumulated depreciation (d) Book value							?				3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (investment) (investment) (investment) (b) Cost or other basis (c) Accumulated depreciation (d) Book value	4	Describe				ndowment funds.							
Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other	Pa	rt VI	Land, Buil	ldings, and E	quipment								_
(investment) (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other			Complete it	f the organizat	ion answered "Y						'art X, li	ne 10	<u>J.</u>
1a Land b Buildings c Leasehold improvements d Equipment e Other			Description of pr	roperty							(d) Book	value	
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c Leasehold improvements d Equipment e Other													
d Equipment													
e Other													
Total. Add lines 1a through 1e, (Column (d) must equal Form 990, Part X, line 10c, column (B)													
	Total	L Add line	es 1a through 1	e. (Column (d) mi	ist equal Form 990.	Part X, line 10c, colum	n (B))						

	(a) Description of security or category	(b) Book value	line 11b. See Form 990, Part X, line (c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
) Financial	derivatives		
	eld equity interests		
4-00.5			
(B)			
(D)	2(2(32.2) 22.223(22)		
(0)			
(H)			
	n (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII	Investments - Program Related		
	Complete if the organization answered "Yes"		
	(a) Description of investment	(b) Book vatue	(c) Method of valuation: Cost or end-of-year market value
1)			
2) 3)			
4)			
5)			
6)			
7)			
8)			
9)	nn (b) must equal Form 990, Part X, line 13, col. (B))		
Part IX	Other Assets Complete if the organization answered "Yes" (a) Description	on Form 990, Part IV,	line 11d. See Form 990, Part X, line
1)	(a) Dood past		
2)			
3)			
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(5) (6)			
5) 6) 7)			
(7) (8) (9)			
(4) (5) (6) (7) (8) (9) otal. (Colum	on (b) must equal Form 990, Part X, line 15, col. (B)) Other Liabilities Complete if the organization answered "Yes"	on Form 990, Part IV	line 11e or 11f. See Form 990, Part
(5) (6) (7) (8) (9) otal. (Colum Part X	Other Liabilities		line 11e or 11f. See Form 990, Part
5) 6) 7) 8) 9) otal. (Colum Part X	Other Liabilities Complete if the organization answered "Yes" line 25. (a) Description of liab		
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Schedule D (Form 990) 2023

Schedule D (Form 990) 20 Supplen	23 ST nental		EDUCATIO on (continued		DATION	INC.	81-458	04/3	Page 5
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Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047 2023

Open to Public

Employer identification number Name of the organization STRIDER EDUCATION FOUNDATION INC. 81-4580473 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Part I Indicate whether the organization raised funds through any of the following activities. Check all that apply. e Solicitation of non-government grants Mail solicitations Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, Yes No or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundralsers) pursuant to agreements under which the fundralser is to be compensated at least \$5,000 by the organization. (iii) Did fund-(vi) Amount paid to (v) Amount paid to raiser have (or retained by) (f) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (ff) Activity from activity fundraiser listed in or entity (fundraiser) organization ontributions? cal. (ii) Yes No 1 2 3 4

Tota	al .,							
3	List all states in which registration or licensing		gistered or lice	nsed to solicit contri	butions or has t	peen notified it is	exempt from	
						** ********		
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12/4		337				** ****		 * - * * - *

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Schedule G (Form 990) 2023 STRIDER EDUCATION FOUNDATION INC. 81-4580473 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with

	gross receipts of	reate	r than \$5,00	00					
			(a) Event #1			(b) Event #2		(c) Other events	(d) Total events (add col. (a) through
		-	(event type)			(event type)		(total number)	col. (c))
Revenue									
Rev	1 Gross receipts				-		_		
	2 Less: Contributions								
	3 Gross income (line 1 minus								
-	line 2)				+				
	4 Cash prizes								
	5 Noncash prizes								
	3 Norteast pizes								
ISes	6 Rent/facility costs				+				
Direct Expenses	7 Food and beverages								
헣									
듭	8 Entertainment								
	9 Other direct expenses								
					. (4)				
	10 Direct expense summary.11 Net income summary. Su	btract 8	ine 10 fmm line	a 3. columi	n (d)		2552		
P	art III Gaming. Com	plete	if the organi	ization a	nswere	ed "Yes" on Forr	m 990,	Part IV, line 19, or re	ported more than
_	\$15,000 on Fo	rm 99	00-EZ, line 6	Sa.		(b) Pull tabs/instant			(d) Total gaming (add
Die			(a) Bingo			bingo/progressive bingo		(c) Other gaming	col. (a) through col. (c))
Revenue								18,060	10 060
_	1 Gross revenue				-		-	18,060	18,060
Expenses	2 Cash prizes								
Expe	3 Noncash prizes								
Direct	4 Pontfinality garts								
ä	4 Rent/facility costs								
_	5 Other direct expenses				-	W		68,000	68,000
	6 Volunteer labor	X	Yes	, %	x	Yes	%	Yes %	
									60.000
	7 Direct expense summary	. Add li	nes 2 through \$	5 in colum	n (d)				68,000
	8 Net gaming income summ	nary. S	ubtract line 7 fi	rom line 1	, column	(d)			-49,940
						an.			
9	Enter the state(s) in which the ls the organization licensed to								
	NOT REQUIRED	 .							
10•	Were any of the organization	i's gam	ing licenses re	voked. sus	pended.	or terminated during	ig the tax	year?	Yes X No
	of "Yes," explain:	guill					-		10.

C-L-	444 C /E	000/ 2022	CONTRACTOR S	EDITO NOT ON	ECIDIDATIO	NT TATC	01_4500472	Page 3
		orm 990) 2023					81-4580473	
11					a member of a partn		r modifie	X Yes No
12	- '	, .			•		enery	Yes X No
13			gaming activity co		.,			les [4] 140
a					.,.,			13a 100.00 %
b								
14	Enter the	name and addre	es of the nerson w	bo prepares the on	ganization's gaming/	special events	books and	70
	records:	Traine and addition	ps		,g			
	Name .	,	YER PLAZA DRIVE		e		* *******************************	er i i i i i i i i i i i i i i i i i i i
	Address	RAPID (ITY				SD 577	02
15a	Does the	organization hav	e a contract with a	third party from wh	om the organization	receives gam	ing	Yes X No
h	If "Yes"	enter the amount	of gaming revenue	received by the or	ganization \$		and the	
					.,		0.1.11	
c			address of the third		.,			
	,							
	Name .	*********		(0.)			g	
	Address	.,,,			· · · · · · · · · · · · · · · · · · ·		Server 1884	
16	Gaming	manager informa	tion:					
	Name	LISA WEYE	īR.					
							21111111000 1411111111111111111111111111	
			nsation \$					
	Descripti	on of services pr	ovided MANA	SE AND ACC	COUNT FOR	RAFFLE	SALES	- (45) =
	X Dire	ctor/officer	X Employee	Inde	pendent contractor			
47	Mandala	dietrih diene:						
17		ry distributions:	el under etate law t	n make charitable (distributions from the	naming nmce	ents to	
a								Yes X No
h	Enter the	e state garring it.	hutions required un	ler state law to be	distributed to other	exempt omani	rations or	
U			own exempt activit			and the digest		
Pa	rt IV					ired by Par	t I, line 2b, columns	(iii) and (v); and
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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 2023 Open to Public Inspection

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 grantees' eligibility for the grants or assistance, and ☐ No 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 recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (h) Purpose of grant (e) Amount of (f) Method of valuation (book, FMV, appraisal, (a) Name and address of organization (g) Description of (b) EIN (c) IRC (d) Amount of cash or assistance noncash assistance or government grant (1) ROTTERDAM-MOHONASEN CSD 2072 CURRY RD NY 12303 14-6011255 GOV LEARN RIDE PROGRAM 5,350 COST BIKES SCHENECTADY (2) SOUTH JEFFERSON CENTRAL SCHOOL D ST LEARN RIDE PROGRAM 423 NORTH MAIN STREET NY 12582 15-6002112 GOV 5,115 COST BIKES MANNSVILLE (3) DERUYTER CENTRAL SCHOOL DISTRICT LEARN RIDE PROGRAM COST 5,210 BIKES DERUYTER (4) HANNIBAL CENTRAL SCHOOL DISTRICT 928 CAYUGA ST NY 13074 LEARN RIDE PROGRAM BIKES COST 16-5002457 GOV 9,980 HANNIBAL (5) METHACTON SCHOOL DISTRICT METHACTON SCHOOL PIKE 3017 SKIPPACK PIKE PA 19446 LEARN RIDE PROGRAM 23-6050689 GOV 5,115 COST BIKE LANSDALE (6) BRIDGEWATER EMERY ELEMENTARY LEARN RIDE PROGRAM 510 N. MAIN STREET SD 57319 COST BIKE 27-1280893 GOV 5,210 BRIDGEWATER (7) PIQUA CITY SCHOOLS 145 E US ROUTE 36 OH 45356 LEARN RIDE PROGRAM 31-6000929 GOV 10,230 COST BIKES PIQUA (8) SHELBY EASTERN SCHOOL CORPORATION 307 W. MAIN ST.

IN 46161 34-1327154 GOV LEARN RIDE PROGRAM COST BIKES MORRISTOWN 5,690 (9) NORTH MONTGOMERY SCHOOL CORPORAT ON 3794 W. US HWY 136

IN 47933 35-1118169 GOV LEARN RIDE PROGRAM COST BIKES CRAWFORDSVILLE 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 0

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

Schedule I (Form 990) 2023

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.

OMB No. 1545-0047 2023 Open to Public Inspection

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for the latest information. Name of the organization STRIDER EDUCATION FOUNDATION INC. 81-4580473 General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ☐ No Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (e) Amount of (a) Description of (h) Purpose of grant (d) Amount of cash (a) Name and address of organization (b) EIN noncash assistance or assistance grent or government (1) MARSHALL PUBLIC SCHOOLS MARSHALL FUBLIA 103 W HUGHES STREET MI 49068 LEARN RIDE PROGRAM COST 38-6000810 GOV 5,115 BIKES MARSHALL (2) EAST LANSING PUBLIC SCHOOL LEARN RIDE PROGRAM COST BIKES 38-6001600 GOV 5,115 EAST LANSING (3) GREEN BAY PUBLIC SCHOOLS 525 SOUTH MADISON STREET
GREEN BAY WI 5 LEARN RIDE PROGRAM WI 54301 39-0783183 GOV 5,115 COST BIKES (4) WESTBY ELEMENTARY SCHOOL WESTST 122 NELSON STREET WI 54667 39-6005143 GOV LEARN RIDE PROGRAM COST BIRES 5,115 WESTBY (5) ROCHESTER PUBLIC SCHOOLS 406 36TH AVE NW MN 55901 41-6002803 GOV LEARN RIDE PROGRAM COST BIKE9 5,820 ROCHESTER (6) FORT DODGE COMMUNITY SCHOOL DISTRIC LEARN RIDE PROGRAM COST BIKES 42-6001767 GOV 5,115 FORT DODGE (7) GRAND FORKS PUBLIC SCHOOL 1015 S 20TH ST ND 58201 LEARN RIDE PROGRAM 45-6000607 GOV 10,230 COST BIKES GRAND FORKS (8) DICKINSON PUBLIC SCHOOLS 102 10TH STREET W
DICKINSON ND 58601 LEARN RIDE PROGRAM 30,690 COST BIKES 45-6001585 GOV (9) MINOT PUBLIC SCHOOLS LEARN RIDE PROGRAM 1000 5TH AVE SE COST BIKES ND 58701 45-6001841 GOV 56,265 MINOT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Schedule 1 (Form 990) 2023

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 2023 Open to Public inspection

Department of the Treesury Internal Revenue Service Employer Identification Name of the organization 81-4580473 STRIDER EDUCATION FOUNDATION INC. General Information on Grants and Assistance Part i 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. Yes No Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (e) Amount of (f) Method of valuation (book, FMV, appraisal, (p) Description of (h) Purpose of grant (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash noncash assistance noncash assistance or assistance or government (1) BISMARCK PUBLIC SCHOOLS 1312 SOUTH COLUMBIA DRIVE LEARN RIDE PROGRAM ND 58504 45-6000242 GOV COST 66,495 BIRES BISMARCK (2) ROCKBRIDGE COUNTY PUBLIC SCHOOLS 85 CENTRAL ROAD VA 24450 54-6001580 GOV LEARN RIDE PROGRAM COST BIKES 5,350 LEXINGTON (3) CHARLOTTE MECHLENBURG SCHOOL DISTRI LEARN RIDE PROGRAM 56-6001074 GOV 20,950 COST BIKES CHARLOTTE (4) COWETA COUNTY 240 MARY FREEMAN ROAD LEARN RIDE PROGRAM 58-6000219 GOV 10,230 COST BIKKS NEWNAN GA 30265 (5) COWETA COUNTY LEARN RIDE PROGRAM 145 RAILROAD STREET GA 30259 BIKES 59-6000597 GOV COST 5,115 MORELAND (6) LAKE COUNTY SCHOOLS LAKE COUNT.
1108 GRIFFIN RD
FL 34748 LEARN RIDE PROGRAM LEESBURG 59-6000694 GOV 12,945 COST BIKES (7) MEMPHIS-SHELBY COUNTY SCHOOLS MEMPRIS 535 ZACH CURLIN TN 38111 LEARN RIDE PROGRAM 62-0648618 GOV 5,115 COST BIKES MEMPHIS (B) WILLIAMSON COUNTY SCHOOLS 2380 HENPECK LANE LEARN RIDE PROGRAM TN 37064 62-6000915 GOV 8,505 COST BIKES FRANKLIN (9) LITTLE ROCK SCHOOL DISTRICT LEARN RIDE PROGRAM 905 MARTIN LUTHER KING, JR. DRIVE 71-6014717 GOV COST AR 72202 5,115 LITTLE ROCK Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) 2023

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.

mplete 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.

2023 Open to Public Inspection

Schedule I (Form 990) 2023

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

3 Enter total number of other organizations listed in the line 1 table

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

Name of the organization STRIDER EDUCATION FOUNDATION INC. 81-4580473 General Information on Grants and Assistance Part I 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. ☐ No Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FNV, appraisal, (b) EIN (d) Amount of cash (e) Amount of (g) Description of (h) Purpose of arent (a) Name and address of organization noncesti essistence or government (1) BENTONVILLE SCHOOL DISTRICT 101 NW ELM TREE LN LEARN RIDE PROGRAM AR 72712 BIKES BENTONVILLE 71-6020503 GOV 20,460 COST (2) GREENBRIER SCHOOL DISTRICT 61 GLENN LN
AR 72058 LEARN RIDE PROGRAM COST BIKES GREENBRIER 71-6020570 GOV 5,115 (3) MONTICELLO SCHOOL DISTRICT MONTICELLE 1037 SCOGIN DR AR 71655 LEARN RIDE PROGRAM MONTICELLO 71-6020606 GOV 5,115 COST BIKES (4) CABOT PUBLIC SCHOOL DISTRICT 1570 WILSON LOOP

AR 72176 LEARN RIDE PROGRAM COST BIKES 71-6020712 GOV 38,835 WARD (5) FORT SMITH PUBLIC SCHOOLS 1600 CAVANAUGH RD FORT SMITH AR 72908 LEARN RIDE PROGRAM 71-6020978 GOV COST BIKES 5,115 (6) FORT SMITH SCHOOL DISTRICT 100 FORT SMILE 815 N 16TH STREET AR 72901 LEARN RIDE PROGRAM COST BIKES FORT SMITH 71-6020978 GOV 8,505 (7) ROGERS PUBLIC SCHOOLS POGERS FUELLAND
901 N. DIKIELAND
AR 72756 LEARN RIDE PROGRAM 71-6021134 GOV 5,115 COST BIKES (8) SPRINGDALE SCHOOLS SPRINGDAM PD. 20200 SONORA RD. AR 72764 LEARN RIDE PROGRAM 71-6021364 GOV 5,115 COST BIKES SPRINGDALE (9) CORPUS CHRISTI INDEPENDENT SCHOOL D 2401 SOUTH ALAMEDA
TX 78404 LEARN RIDE PROGRAM 74-6000581 GOV 5,115 COST CORPUS CHRISTI 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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.

2023 Open to Public nspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Employer Identification number me of the organiz 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 grantees' eligibility for the grants or assistance, and Yes No 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. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (book, FMV, appraisal, (b) EIN (e) IRC section (d) Amount of cash (e) Amount of (g) Description of (h) Purpose of grant (a) Name and address of organization noncash assistance noncash assistance or assistance or government orant (1) MESA COUNTY VALLEY SCHOOL DISTRICT MESA CUUNII 353 N. MESA STREET CO 81521 84-6002839 GOV LEARN RIDE PROGRAM 5,115 COST BIKES FRUITA (2) ST VRAIN VALLEY SCHOOL DISTRICT LEARN RIDE PROGRAM 5,115 COST BIKES LONGMONT (3) GRANITE SCHOOL DISTRICT 4905 S 4300 W UT 84118 LEARN RIDE PROGRAM COST 87-6000494 GOV 5,115 BIKES SALT LAKE CITY (4) INCHELIUM SCHOOL DISTRICT 2 HORNET AVE WA 99138 91-0911819 GOV LEARN RIDE PROGRAM COST BIKES 5,115 INCHELIUM (5) CASCADE SCHOOL DISTRICT CASCADE SCHOOL STREET LEARN RIDE PROGRAM WA 98847 91-1215072 GOV 5,115 COST BIKES PESHASTIN (6) SEATTLE PUBLIC SCHOOLS SEATTLE FUDILITY SEATTL LEARN RIDE PROGRAM COST BIKES 91-6001541 GOV 56,265 SEATTLE (7) ENUMCLAW SCHOOL DISTRICT LEARN RIDE PROGRAM 2057 KIBLER AVENUE WA 98022 5,115 COST BIKES 91-6007327 GOV ENUMCLAW (8) MATANUSKA SUSITNA BOROUGH SCHOOL DI LEARN RIDE PROGRAM 501 NORTH GULKANA ST. COST BIKES PALMER AK 99645 92-6000034 GOV 12,570 (9) LAUSD LEARN RIDE PROGRAM 333 SOUTH BEAUDRY AVENUE CA 90017 95-6001908 GOV COST BIKES 59,205 LOS ANGELES

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

Schedule I (Form 990) 2023

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

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.

2023 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service	Go	to www.ir:	s.gov/Form990 for t	ne latest information	1.		Inspection
arme of the organization STRIDER EDUCATI	ON FOUNDATIO	ON INC	1.				Employer Identification number B1-4580473
Part I General Information on Gran							
Does the organization maintain records to substaths selection criteria used to award the grants or Describe in Part IV the organization's procedures	assistance?	of crant fun	ds in the United States				
Part II Grants and Other Assistance Part IV, line 21, for any recipies	to Domestic Org	anizatior	ns and Domestic	Governments.	additional spac	e is needed.	n answered "Yes" on For
(a) Name and address of organization or government	(b) EIN	(o) IRC section	(di) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of veluation (book, FMV, appraisal, other)	(g) Description of noncestr assistance	3.5
1) VISTA UNIFIED SCHOOL DISTRICT 1111 MELROSE WAY VISTA CA 92081	95-6003432	GOV	23,725		COST	BIKES	LEARN RIDE PROGRA
2)							
	. ,						
3)							
9							
Ŋ							
s) 							
7)							
• • • • • • • • • • • • • • • • • • • •							
3)							
91							
 Enter total number of section 501(c)(3) and gove Enter total number of other organizations listed in 							
For Paperwork Reduction Act Notice, see the Inst	ructions for Form 990.						Schedule I (Form 990)

Part III Grants and Other Assistance	UCATION FOUNDATE to Domestic Individ	luals. Complete if	31-4580473 the organization ansv	vered "Yes" on Form 990,	Part IV, line 22.
Part III can be duplicated if ac (a) Type of grant or assistance	dditional space is neede (b) Number of reciplents	ed. (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.			f 0 D 1 III - 1	- III	in and information
SEE SCHEDULE I SUPPLEMEN	TAL INFORMATIO	,,			
		* 1 * * * * * * * * * * * * * * * * * *			
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Schedule I (Form 990) 2023

SCHEDULE	١
(Form 990)	

Supplemental Information

and ending

2023

For calendar year 2023, or tax year beginning

Employer Identification number

vame of the organization				
	STRIDER	EDUCATION	FOUNDATION	INC

81-4580473

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS
ALL GRANTS AND DESIGNATED FUNDS ARE DEPOSITED INTO A RESTRICTED BANK
ACCOUNT AND ARE NOT EXPENDED OR MOVED FROM THE RESTRICTED ACCOUNT UNTIL THE
PROGRAM HAS SHIPPED.
PER THE REQUEST OF THE DONOR/GRANTOR A SPECIFIED SCHOOL(S) IS SELECTED AND
THE GIFT IS RECORDED IN BLOOMERANG, A DONOR MANAGEMENT SOFTWARE SYSTEM BY
SEF STAFF. BLOOMERANG AUTOMATICALLY SYNCS WITH QUICKBOOKS ACCOUNTING
SOFTWARE WHICH IS MANAGED BY A THIRD PARTY BOOKKEEPING COMPANY.
THE FUNDED SCHOOL(S) RECEIVE THE ALL KIDS BIKE KINDERGARTEN PE PROGRAM
CONSISTING OF A FLEET OF 24 BALANCE BIKES, PEDAL CONVERSION KITS, FULLY
ADJUSTABLE HELMETS, ONE TEACHER INSTRUCTION BIKE WITH PEDAL KIT, 2 METAL
ROLLING STORAGE RACKS, ONLINE ACCESS TO CURRICULUM TRAINING, 8 COMPLETE
LESSON PLANS, GAMES, ACTIVITIES, AND CONTINUED SUPPORT FOR THE 10-YEAR LIFE
OF THE PROGRAM. 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 RECEIVE A GIFT TAX RECEIPT.
a man man na jama na ra man a man a man na man na man na man a
§

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.

OMB No. 1545-0047

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest Information.

Open to Public Inspection

	STRIDER EDUCATIO	N FOUNDATION	INC.				81-4	15804	73				
Part I	Excess Benefit Transac Complete if the organization ans												
	(a) Name of disqualified person	(b) Relation	ship between disq	ualfie	l pers	on and	(c) Description of to	c) Description of transaction			(d)	(d) Corrected	
1	(a) realing of disqualitad person		organization				(o) Bookham or a	0110000			Yes	5	No
(1)											_	-	
(2)											-	+	_
(3)				_	_						-	-	_
(4)											-	+	
(5)					_			_		_	-	+	_
(6)			1. 100	_		and the su				_			_
under	the amount of tax incurred by the or section 4958							17.01		_			
3 Enter to	Loans to and/or From I			auu	٠			· · · · · ·	_				
rant II	Complete if the organization ans organization reported an amount	wered "Yes" on Fo	ımı 990-EZ, Pa			38a, or Form 9	90, Part IV, line	26; or	if the	,			
	(a) Name of interested person	(b) Relationship with organization		(d) to or	from	(e) Original principal amount	(f) Balance due	(g) In			oproved oard or mittee?		Vritten ement
					rom			Yes	No	Yes		Yes	No
245													
(1)													Т
(2)								\vdash	-			\vdash	\vdash
(3)				-				\vdash	H	H	-	-	\vdash
(4)								-	-	-		-	-
(5)												ļ_	_
(6)				1				_	-			_	L
(7)												L	L
(8)													
(9)													
10)													
Total													
Part III	Grants or Assistance B Complete if the organization and	lenefiting Inte	rested Persorm 990, Part	son	5								
	(a) Name of interested person		ship between intercand the organization			(c) Amount of assistance	(d) Type of assistant	28	(e)	Purpos	e of as	sistanc	0
(1)													
(2)													
(3)													
(4)				_				-					
(5)				_	-			+					_
(6)					-			-			_	_	
(7)					-			-		_			
(8)					-			-	_				_
(9)				_	+	-		+				_	
10)					100			-					

Part IV	Business Transactions Involving Interested Persons
	Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(e) Name of interested person			(b) Relationship interested person		(c) Amount of transaction	(d) Description of transaction			Sharing org. nues?
			organizati	on				Yes	No
(1) STRIDER	SPORTS	INTERNATIONAL	BUSINESS	OWNER	1,547,946	PRODUCT PU	RCHASE		X
(2) STRIDER		INTERNATIONAL	BUSINESS	OWNER	-272,678	MANAGEMENT	SERVICES		X
(3)									
(4)									
(5)									
(6)									
(7)									
(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 ADMINISTRATIVE 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 "ADMINISTRATIVE SERVICES" ABOVE. THESE DONATED SERVICES ARE NOT INCLUDED IN THE FORM 990.

7	HE	SEC	RETAI	RY/TR	EASUR	ER	OF	THE	FOUNDAT	'ION :	IS	THE	PRESID	ENT/	OWNER	OF	STRIDER
5	POR	TS	INTE	RNATI	ONAL	•											

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.

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection Employer Identification number

OMB No. 1545-0047

STRIDER EDUCATION FOUNDATION INC.	81-4580473
FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT	ACTIVITIES
THE STRIDER EDUCATION FOUNDATION'S MISSION THROUGH THE	ALL KIDS BIKE
PROGRAM IS TO TEACH EVERY CHILD IN AMERICA HOW TO RIDE	A BIKE IN
KINDERGARTEN PE CLASS. OUR INITIATIVE PROVIDES CHILDREN	N THE OPPORTUNITY TO
LEARN HOW TO RIDE A BIKE, A SKILL THAT FOSTERS INDEPEN	DENCE, CONFIDENCE,
AND FITNESS. OFTEN, WE ASSUME THAT LEARNING TO RIDE A	BIKE IS A CHILDHOOD
RITE OF PASSAGE. THE REALITY IS THIS IS NOT NECESSARILY	Y A SKILL BEING
TAUGHT AT HOME, WHETHER IT BE FAMILY FINANCIAL DIFFICU	LTIES, LACK OF TIME,
LACK OF SPACE, OR ANY OTHER REASON. HAVING INSTRUCTION	N AND EQUIPMENT AT
THE SCHOOLS HAS PROVEN TO BE A SUCCESSFUL SOLUTION.	
FORM 990 - ORGANIZATION'S MISSION	a
THE STRIDER EDUCATION FOUNDATION'S MISSION THROUGH THE	ALL KIDS BIKE
PROGRAM IS TO TEACH EVERY CHILD IN AMERICA HOW TO RIDE	A BIKE IN
KINDERGARTEN PE CLASS. AS A RESULT OF TEACHING CHILDRI	EN HOW TO RIDE A BIKE
IN SCHOOL, WE'RE PROMOTING PHYSICAL ACTIVITY, IMPROVED	MENTAL WELL-BEING,
AND INCREASED CONFIDENCE. OUR CURRICULUM DEVELOPS ESSE	NTIAL LIFE SKILLS
LIKE BALANCE, COORDINATION, AND INDEPENDENCE, FOSTERING	A LOVE FOR PHYSICAL
ACTIVITY FROM AN EARLY AGE. THERE ARE MANY STATISTICS,	SUCH AS THE
INCREASING PREVALENCE OF DIGITAL DEVICE USE AND CHILDH	OOD OBESITY RATES,
THAT UNDERLINE THE IMPORTANCE OF INITIATIVES LIKE ALL	KIDS BIKE.
FORM 990, PART I, LINE 6	-,
AMBASSADORS/VOLUNTEERS PROMOTE THE MISSION OF ALL KIDS	BIKE WITHIN THEIR
COMMUNITIES AND ON SOCIAL MEDIA. THEY SOMETIMES HELP IF Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	BUILD AND DELIVER THE Schedule O (Form 990) 2023

Employer Identification number

STRIDER EDUCATION FOUNDATION INC.

81-4580473

BIKES TO AREA SCHOOLS. 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 NATIONAL MOVEMENT TO PLACE LEARN-TO-RIDE PROGRAMS INTO KINDERGARTEN PE CLASSES IN SCHOOLS ACROSS THE NATION WITH DONATIONS, GRANTS, AND PARTNERSHIPS FROM INDIVIDUALS, BUSINESSES, AND ORGANIZATIONS. THE FOUNDATION WAS ORGANIZED AND RECEIVED THEIR 501(C)(3) STATUS IN MARCH 2017. 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 SUCCESSFUL LEARN-TO-RIDE BIKE CURRICULUM IN A SCHOOL PE CLASS, AND WE DELIVERED 126 PROGRAMS. IN 2021, WE DELIVERED 184 PROGRAMS. 2022 WAS A PIVOTAL YEAR FOR US WHERE WE DELIVERED 380 PROGRAMS. 2023 WE HAD AN INCREASE IN DONATIONS AND WILL WORK ON DELIVERING PROGRAMS TO EVERY ELEMENTARY SCHOOL IN ONE STATE. PROGRAMS DELIVERED WERE 326 IN 2023. THE STRIDER EDUCATION FOUNDATION HAS DELIVERED OVER 1100 PROGRAMS IN ALL 50 STATES WHICH IMPACTS OVER 120,000 STUDENTS ON AN ANNUAL BASIS AND OVER 1.2 MILLION THROUGHOUT THE 10-YEAR LIFESPAN OF THE PROGRAM. 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

PAGE 1 OF 3

Employer identification number

STITTOFF	EDUCATION	FOUNDATION	INC.
SIRIUM		T. OOMDEST TOM	

81-4580473

SIRIDER EDUCATION FOUNDATION INC.
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-KINI
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
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

PAGE 2 OF 3

Schedule O (Form 990) 2023 Name of the organization	Employer Identification number
STRIDER EDUCATION FOUNDATION INC.	81-4580473
DONATED AS AN IN-KIND DONATION TO THE STRIDER EDUCATION	N FOUNDATION.
FORM 990, PART VI, LINE 17 - OTHER STATES WHERE COPY C	F RETURN IS FILED
NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEW YORK, OKLAH	IOMA, OREGON,
PENNSYLVANIA, SOUTH CAROLINA, TENNESSEE, UTAH, VIRGINI	A, WISCONSIN,
WEST VIRGINIA	
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCI	OSURE EXPLANATION
THE FOUNDATION HAS A POLICY TO ENSURE TRANSPARENCY, CH	REDIBILITY, AND
ACCOUNTABILITY. WE REVIEW ALL PUBLIC REQUESTS FOR INFO	RMATION 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 W	ITH ANY OTHER
QUESTIONS ARE AVAILABLE ON OUR WEBSITE. ANNUAL REPORT	'S ARE ALSO AVAILABLE
FOR VIEWING ON OUR WEBSITE.	
FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES	
DESCRIPTION	
TOT/PROG SERVICE MGT & GENERAL	FUNDRAISING
CONSULTANT	
\$ 0 \$ 0	\$ 339,111
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSE	rs explanation
COST OF GOODS - MOTORCYCLE RAFFLE	\$ 68,000
COST OF GOODS - MOTORCYCLE RAFFLE	\$ -68,000
ROUNDING	
TOTAL	
and the state of t	