**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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For the	2022 calend	ar year, or tax ye	ar beginn	ing			, 2022, a	nd endi	ng		, 20	
В	Check if a	applicable:	C Name of organizati	ion <b>Rec</b>	d Oak ISD Edu	cation Four	datio	n In			D Emplo	oyer identification nur	mber
	Address o	change	Doing business as	i							05-0523972		
	Name cha	ange	Number and street	t (or P.O. box	if mail is not delivered to	street address)			Room/sui	te	E Teleph	hone number	
一	Initial retu	-	PO Box 9	000								(972) 617-43	320
П	Final retu	rn/terminated	City or town, state	or province, o	country, and ZIP or foreig	ın postal code					<b>G</b> Gross	s receipts	
Ē,	Amended	return	Red Oak,			•					\$	·	7,204
一		n pending	F Name and address			Stanfill				H(a) Is this a d	roup return f	for subordinates? Yes	
_			Same as (							H(b) Are all s			$\overline{}$
	Tax-exem	pt status:		1(c) (	) (insert no.)	4947(a)(1) or	527					st. See instructions	_
	Website:			( / (	, , ,	_				H(c) Group e			
		rganization: X		ıst Asso	ciation Other		L Yea	r of formatio	n: 200			al domicile: <b>TX</b>	
-	rt I	Summar			<u> </u>				200		iato or rog	an definione.	
	1			n's missio	n or most significar	nt activities: T	he mis	ssion o	of the	e Educat	ion F	Foundation i	s to
		•	-		sources for	_							
Activities & Governance					ty of educat								
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Ver	2				scontinued its opera	ations or disposed	of more	than 25%	6 of its n	et assets.			
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Revenue	8	Contributions	s and grants (Part	VIII line 1	h)						,437		
	9		• ,		2g)					- 07	, 431		0
	10	•	,		, lines 3, 4, and 7d					17	,281		21,669
Š	11				es 5, 6d, 8c, 9c, 10d					100			
Œ	12							4,597					
	13			,	ust equal Part VIII, , column (A), lines	. ,					,113		7,792
	14		•	,	column (A), line 4)	*				65	,252		.7,672
	15	•		,	benefits (Part IX, c								0
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Expenses			sing expenses (Pa										0
ğ	17		•		es 11a-11d, 11f-24e	.)		3,305		F 2	120	7	
ш	18	-	,	` '	qual Part IX, colum	,					,139		14,240
	19		s expenses. Subt								,391		91,912
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isse.	21		es (Part X, line 26)							1,466	, 333	1,20	57,590 0
Net Assets or	22		r fund balances. S		ne 21 from line 20					1,466	555	1 26	<u></u>
-	rt II		re Block	Japa aot III	10 21 110111 11110 20					1,400	, 555	1,20	17,390
				ed this return	, including accompanyin	g schedules and stater	nents, and to	o the best of	f my know	ledge and belie	f, it is		
true	correct, a	and complete. De	claration of preparer (otl	her than offic	er) is based on all inform	ation of which prepare	has any kn	owledge.					
		Karo	n Anderson										
Sig	n	Signature of office									L	te	
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N/	the IDC	2 diagnas #51			475034	tructions						464-1226	
ıvıay	me iKS	o discuss this	return with the pre	:parer sno	wn above? See ins	แนะแบกร						X Yes	∐ No

2) Red Oak ISD Education Foundation In Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		Х
b				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	44.		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	44.4		
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
£	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete			Х
124	Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	124		
~	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		х
20 a		20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

05-0523972

Form 990 (2022) Red Oak ISD Education Foundation In Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		_ X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
0.4	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes,"</i>			
22	complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	22		
24		33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	24		.,
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	JJa		Х
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	335		
50	related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 50		
<i>31</i>	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	<u> </u>		
30	19? <b>Note</b> : All Form 990 filers are required to complete Schedule O	38	x	
Par		- 50	_ ^	
ı aı	Check if Schedule O contains a response or note to any line in this Part V			П
		· · ·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.03	110
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
•	reportable gaming (gambling) winnings to prize winners?	1c		

Page 5

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
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 O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?	9a		.,
a	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
b 10	Section 501(c)(7) organizations. Enter:	90		Х
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
40	If "Yes," see the instructions and file Form 4720, Schedule N.	40		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
17	If "Yes," complete Form 4720, Schedule O.  Section 501(c)(21) expanizations. Did the trust, or any any disqualified or other person engage in any activities.			
17	<b>Section 501(c)(21) organizations.</b> Did the trust, or any any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.	17		
	n roo, complete i onn cocc.			

Part VI

2) Red Oak ISD Education Foundation In 05-0523972

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

	response to line oa, ob, or rob below, describe the circumstances, processe	_
	Check if Schedule O contains a response or note to any line in this Part VI	 X
Section A.	Governing Body and Management	

3 Did the organization delegate control over management dutiles customarily performed by or under the clined:  4 Up the organization make any significant changes to its governing documents since the prior Form 990 was filed?  4 X X  5 Did the organization become aware during the year of a significant diversion of the organization's assets?  5 Did the organization have members or stockholders?  6 X X  6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  7 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  8 Did the organization contemporaneously document the meetings the organization one or more members of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  8 The governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  8 The governing body?  9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's making address of the Yes, Provide the names and addresses on Schedule O  9 1 X  SOCIOID B. Policies (This Section B requests information about policies not required by the Internal Revenue Code).  100 Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purpose?  100 Did the organization have written policies and procedures governing the activities of such chapters.  101 Did the organization have written policies and procedures governing the activities of such chapters.  102 Did the organization have written policie				Yes	No
if the governing body delegated broad authority to an executive committee or similar committee, oxplain on Schedule O.  b Eniste the number of voling members included in line 1a, above, who are independent	1a	Enter the number of voting members of the governing body at the end of the tax year 1a 14			
be committee, explain on Schedule O.  Enter the number of voting members included in line 1a, above, who are independent  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management or or part of the direct supervision of officers, directors, tirustees, or key employees to a management company or other person?  3		If there are material differences in voting rights among members of the governing body, or			
b Einer the number of voiling members included in line 1st, above, who are independent 1 b 14 2 Did any officar, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees ?  2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees of a significant diversion of the organization and officers, directors, trustees, or key employees to a management organization and officers directors, trustees, or key employees to a management organization and the program of the organization have members and the power of a significant diversion of the organization's assets?  5 Did the organization have members as tockholders?  6 Did the organization have members or stockholders?  7 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  8 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  9 The governing body?  10 The state of the organization orthogover than the governing body?  11 The governing body?  12 Section B. Policies (This Section B requests information about policies not required by the internal Revenue Code.)  12 Section B. Policies (This Section B requests information about policies not required by the internal Revenue Code.  12 Section B. Policies (This Section B requests information about policies not required by the internal Revenue Code.)  13 In the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistently with the organization brace written policies and procedures governing the policy?  14 In t		if the governing body delegated broad authority to an executive committee or similar			
2 Did any officer, director, frustee, or key employee have a family relationship or a business relationship with any other officer, director, frustee, or key employee?  3 Did the organization delegate control over menagement duties customanly performed by or under the direct supervision of officers, directors, frustees, or key employees to a management company or other person?  4 Did the organization become aware during the year of a significant diversion of the organization's assesse?  5 Did the organization have members or stockholders?  6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  7 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  8 Did the organization one members of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  8 The governing body?  8 But the organization one the programmeously document the meetings held or written actions undertaken during the year by the following:  8 The governing body?  8 But a The governing body?  8 But a The governing body?  9 Is there any officer, director, trustee, or key employee listed in Part VIII, Section A, who cannot be reached at the organization have written policies and procaduresses on Schedule O  9 Yes Not Not Did the organization have written policies and procaduresses on Schedule O  9 Yes Not Not Did the organization have written policies and procadures governing the activities of such chapters, affitialess, and the undertaken, and fill and the procass, if any, used by the organization is even by the Form 980.  10 Under the organization have a written conflict or interest policy? If If Not got to the Visit of the procass, if any, used by the organization or e		committee, explain on Schedule O.			
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Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  b Describe on Schedule O the process, if any, used by the organization to review this Form 990.  12a Did the organization have a written conflict of interest policy? If "No," go to line 13  b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"  describe on Schedule O how this was done  12c x  13 Did the organization have a written whistleblower policy?  13 Light by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  a The organization's CEO, Executive Director, or top management official  b Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement  with a taxable entity during the year?  16a Difficulty organization invest in, contribute assets to, or participate in a joint venture or similar arrangement  with a taxable entity during the year?  16a Difficulty organization in joint venture arrangements under applicable federal tax law, and take steps to safeguard the  organization's exempt status with respect to such arrangements?  16b Section C. Disclosure  15c List the states with which a copy of this Form 990 is required to be filed  Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)  (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website Another's website Upon request Other (explain on Schedule O)			10b		
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"  describe on Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization in 15a or 15b, describe the process on Schedule O. See instructions.  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  The progranization in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Discriber C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  Section C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  Section G. Objection C. Discriber and organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website Another's website Upon request Other (explain on Schedule O)	11a	·			х
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If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed  Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website Another's website Donn request Other (explain on Schedule O)	b				
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organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed  18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)  (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website Another's website X Upon request Other (explain on Schedule O)					
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(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  Very Upon request  Other (explain on Schedule O)					
Own website  Another's website  Upon request  Other (explain on Schedule O)					
<u> </u>					
	19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
and financial statements available to the public during the tax year.	-				
20 State the name, address, and telephone number of the person who possesses the organization's books and records.	20				
The Organization (972)617-4320, PO Box 9000, Red Oak, TX 75154	-				

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- 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 instructions for the order in which to list the persons above.

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

(A) (B) Name and title (B) Name					(	(C)					
Authorized   Aut	(A)	(B)	Position				(D)	(F)	(F)		
Comparison   Per vector (Its are)   Per vec	• •	, ,	٠,	`					, ,		
Comparization (W-2)	Name and due	-							•	· ·	
Company   Comp		per week					,				'
(1) Rhonda Landrum			악 코	=	Q	ž	g II	Fc			
(1) Rhonda Landrum			divid	stitut	ficer	y er	ghes	rme			
(1) Rhonda Landrum			ctor t	iona		nplo	st co	_			
(1) Rhonda Landrum		-	ruste	trus		yee	mpe				
(1) Rhonda Landrum		dotted line)	ď	stee			nsate				
Vice President							ed.				
Vice President											
C  Johnny Knight	(1) Rhonda Landrum	2.00									
Trustee	Vice President		х						0	0	0
Column	(2) Johnny Knight	2.00									
Trustee	Trustee		х						0	0	0
(4) Charmin McKee       2.00         Trustee       x       0       0       0         (5) Dawn Tunnell       2.00       x       0       0       0         Trustee       x       0       0       0       0         (6) Amelia Trojacek       2.00       0       0       0       0         Trustee       x       0       0       0       0         (7) Sherelle Shaw       2.00       0 <td>(3) Terressa Chandler</td> <td>2.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(3) Terressa Chandler	2.00									
Trustee	Trustee								0	0	0
S   Dawn Tunnell	(4) Charmin McKee	2.00									
Trustee         X         0         0         0           (6) Amelia Trojacek         2.00         0         0         0         0         0           Trustee         X         0	Trustee		_						0	0	0
(6) Amelia Trojacek	(5) Dawn_Tunnell	2.00									
Trustee       X       0       0       0         (7) Sherelle Shaw       2.00       0       0       0         Trustee       X       0       0       0         (8) Marcus Balch       2.00       0       0       0         Trustee       X       X       0       0       0         (9) Monique Ballard       2.00       0       0       0       0         Trustee       X       X       X       0       0       0         (10)Lynne Grandstaff       2.00       X       X       0       0       0         Secretary       X       X       X       0       0       0       0         Treasurer       X       X       X       0       0       0       0       0         Superintendent       X       X       X       0	Trustee		х						0	0	0
Trustee	(6) Amelia Trojacek	2.00									
Trustee			Х						0	0	0
(8) Marcus Balch       2.00         Trustee       X       0       0       0         (9) Monique Ballard       2.00       X       X       0       0       0         Trustee       X       X       X       0       0       0         (10)Lynne Grandstaff       2.00       X       X       0       0       0         Secretary       X       X       0       0       0       0         (11)Karen Stanfill       2.00       X       X       0       0       0         Treasurer       X       X       X       0       0       0         (12)Brenda Stanford       2.00       X       X       0       0       0         Superintendent       X       X       X       0       0       0         President       X       X       X       0       0       0         Trustee       X       X       0       0       0       0	(7) Sherelle Shaw	2.00									
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Monique Ballard	(8) Marcus Balch	2.00									
Trustee       X       X       X       0       0       0         (10)Lynne Grandstaff       2.00       X       X       0       0       0         Secretary       X       X       X       0       0       0         (11)Karen Stanfill       2.00       X       X       0       0       0         Treasurer       X       X       0       0       0       0         (12)Brenda Stanford       2.00       X       X       0       0       0         Superintendent       X       X       0       0       0       0         (13)Donny Lutrick       2.00       X       X       0       0       0         President       X       X       X       0       0       0         Trustee       X       X       X       0       0       0	Trustee		Х						0	0	0
(10) Lynne Grandstaff	(9) Monique Ballard	2.00									
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(11)Karen Stanfill     2.00       Treasurer     X     X       (12)Brenda Stanford     2.00       Superintendent     X     X       (13)Donny Lutrick     2.00       President     X     X       (14)Cindy Harvey     2.00       Trustee     X     X	(10)Lynne Grandstaff	2.00									
Treasurer         X         X         X         0         0         0           (12)Brenda Stanford         2.00         X         X         0         0         0           Superintendent         X         X         X         0         0         0           (13)Donny Lutrick         2.00         2.00         0         0         0         0           President         X         X         X         0         0         0         0           (14)Cindy Harvey         2.00         X         X         0         0         0         0           Trustee         X         X         X         0         0         0         0	Secretary				х				0	0	0
(12)Brenda Stanford       2.00         Superintendent       X       X       0       0       0         (13)Donny Lutrick       2.00       0       0       0       0         President       X       X       0       0       0         (14)Cindy Harvey       2.00       0       0       0       0         Trustee       X       X       X       0       0       0	(11)Karen_Stanfill	2.00									
Superintendent         X         X         X         0         0         0           (13)Donny Lutrick         2.00         X         X         0         0         0           President         X         X         X         0         0         0           (14)Cindy Harvey         2.00         X         X         0         0         0           Trustee         X         X         X         0         0         0	Treasurer				х				0	0	0
Company Lutrick	(12)Brenda Stanford	2.00									
President         X         X         0         0         0           (14)Cindy Harvey         2.00         2.00         0 <td< td=""><td>Superintendent</td><td></td><td>х</td><td></td><td>х</td><td></td><td></td><td></td><td>0</td><td>0</td><td>0</td></td<>	Superintendent		х		х				0	0	0
(14)Cindy Harvey     2.00       Trustee     X       X     X	(13)Donny Lutrick	2.00									
Trustee X X 0 0 0	President			Ш	х				0	0	00
	(14)Cindy Harvey	2.00									
	Trustee		Х		х				0	0	

EEA Form **990** (2022)

	90 (2022) Red Oak ISD Educa	tion Fou	ndat	ion	In	ı				05-052	3972		ge <b>8</b>
Part	VII   Section A. Officers, Directors, T	rustees, l	Key E	mp	oloy	/ee	s, an	d F	lighest Comp	ensated Emp	loyees	(contin	ued)
	(A) Name and title	Average box, unless person is both an officer and a director/trustee) Reportable compensation compensor from the from re						(E)  Reportable compensation from related organizations (W-2/	со	(F) nated amou of other mpensation			
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		1099-MISC/ 1099-NEC)	orga	nization ar d organizat	
	ren Anderson	40.00			v				0	0			
(16)	Director				X				0	0			0_
<u>(17)</u>													
<u>(18)</u>													
<u>(19)</u>													
(20)_													
<u>(21)</u>													
(22)													
<u>(23)</u>													
(24)													
<u>(25)</u>													
1b c	Subtotal			• •	• •			•					
d	Total (add lines 1b and 1c)			· ·	· ·	· ·	 		0	0			0
2	Total number of individuals (including but not limite reportable compensation from the organization	ed to those lis	sted ab	ove)	who	rec	eived	mor	e than \$100,000 of				0
-												Yes	No
3	Did the organization list any <b>former</b> officer, directo employee on line 1a? <i>If</i> "Yes," complete Schedule			•		-					. 3		x
4	For any individual listed on line 1a, is the sum of re-	-	•					•					
	organization and related organizations greater than individual										. 4		x
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? <i>If "Yes,"</i>			-			_		ation or individual		. 5		x
Secti	on B. Independent Contractors		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , ,		о р	0.00					l I	
1	Complete this table for your five highest compensation from the organization. Report comp												
	(A)	ensation for	uie cai	Criuc	ai ye	ai Ci	ilding	VILLI	(B)	ization's tax year.	(C)		
	Name and business addres	s							Description of service	es	Compens	sation	
2	Total number of independent contractors (including received more than \$100,000 of compensation from			hose	liste	ed al	oove)	who					

05-0523972

Part VIII State

Stat	temen	it of F	Revenue
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		Check if Schedule O contains a response	or no	te to any line in this	Part VIII			
		·		,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ants ints	1a b c	Federated campaigns	1a 1b 1c	91,526				
iifts, Gr ar Amou	d e	Related organizations						
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
Contrib and Oth	g	Noncash contributions included in lines 1a-1f	1g	\$	01 506			
	h	Total. Add lines 1a-1f	• • •		91,526			
				Business Code				
e O	2a							
ه ≧	b							
Se								
gram Serv Revenue	d							
g &	е							
Program Service Revenue	f	All other program service revenue						
_		Total. Add lines 2a-2f						
		Investment income (including dividends, inte other similar amounts)	rest, a	and	21,669	21,669		
	4	Income from investment of tax-exempt bond	proce	eds				
	5	Royalties		[				
		(i) Real		(ii) Personal				
	6a	Gross rents 6a		` '				
		Less: rental expenses 6b						
		· —						
		` /						
	a	` ′ [ ]						
	7a	Gross amount from (i) Securities sales of assets	:S	(ii) Other				
		other than inventory 7a						
	b	Less: cost or other basis						
evenue		and sales expenses 7b						
ver	С	Gain or (loss) 7c						
œ	d	Net gain or (loss)	. <u></u>					
Other	8a	Gross income from fundraising events (not including \$ 91,526						
		of contributions reported on line  1c). See Part IV, line 18	8a	153,694				
	b	Less: direct expenses	8b					
		Net income or (loss) from fundraising events	<u> </u>		114,282			114,282
		Gross income from gaming						===,===
	••	activities, See Part IV, line 19	9a					
	L .	Less: direct expenses	9b					
		•						
	C	Net income or (loss) from gaming activities	· ·					
		Gross sales of inventory, less returns and allowances	10a					
	b	Less: cost of goods sold	10b					
	С	Net income or (loss) from sales of inventory						
				Business Code				
Miscellanous Revenue	11a	Uncategorized Income		900099	315	315		
no	b							
ella ver	С							
is c.		All other revenue						
Σ		Total. Add lines 11a-11d			315			
		Total revenue. See instructions			227,792	21,984	0	114,282
		. T			441,134			1111/604

# Form 990 (2022) Red Oak ISD Education Foundation In 05-0523972 Page 10 Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).
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	Check if Schedule O contains a response or note to a				
	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	<b>(D)</b> Fundraising
_	0b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21	117,672	117,672		
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,				
_	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	5,000		5,000	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	978		978	
13	Office expenses	31,724	22,558	9,166	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,770		2,770	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
_	(A), amount, list line 24e expenses on Schedule O.)				
а	Convocation	8,062		8,062	
b	Credit Card Fees	1,791		1,791	
C	Dues & Subscriptions	153		153	
d	Grant Program	1,759		1,759	
е	All other expenses	22,003	446	8,698	13,305
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	191,912	140,230	38,377	13,305
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

05-0523972

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	152,023	1	169,756
	2	Savings and temporary cash investments	60,168	2	39,528
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	250	4	2,300
	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	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ğ	9	Prepaid expenses and deferred charges	1,749	9	2,245
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation		10c	
	11	Investments - publicly traded securities	1,252,365	11	1,053,761
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,466,555	16	1,267,590
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
-iat		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow FASB ASC 958, check here			
ces		and complete lines 27, 28, 32, and 33.			
lan	27	Net assets without donor restrictions	1,466,555	27	1,267,590
Ва	28	Net assets with donor restrictions		28	
nd		Organizations that do not follow FASB ASC 958, check here			
딘		and complete lines 29 through 33.			
S O	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net	32	Total net assets or fund balances	1,466,555	32	1,267,590
	33	Total liabilities and net assets/fund balances	1,466,555	33	1,267,590

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the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

Schedule O.

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

If the organization changed either its oversight process or selection process during the tax year, explain on

### SCHEDULE A (Form 990)

### **Public Charity Status and Public Support**

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

OMB No. 1545-0047

Quality Open to Public

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

Inspection

Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number Red Oak ISD Education Foundation In 05-0523972 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 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.) 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 12 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. а Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С 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 I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

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

Secu	on A. Fublic Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
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	<b>Total.</b> Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4 .						
	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10	, , , ,	L			40	
12	Gross receipts from related activities, etc.	,				12	(0)
13	First 5 years. If the Form 990 is for the or						
Cooti	organization, check this box and stop her	e		<del></del>		<del></del>	· · · · · · ·
<u> 14</u>	on C. Computation of Public Supportion Public Support percentage for 2022 (line 6			1 solumn (f))		14	%
	Public support percentage for 2022 (line of Public support percentage from 2021 Sch	. , , ,	•			15	——————————————————————————————————————
15 160	33 1/3% support test - 2022. If the organi						
16a	box and <b>stop here.</b> The organization qual						
b	33 1/3% support test - 2021. If the organi	•		-			<del>-</del>
b	this box and <b>stop here.</b> The organization						
17a	10%-facts-and-circumstances test - 202			-			_
174	10% or more, and if the organization mee	-					
	Part VI how the organization meets the fa					•	
	organization			•	•		_
b	10%-facts-and-circumstances test - 202						
D	15 is 10% or more, and if the organization	-					
	in Part VI how the organization meets the					•	•
	organization			-			
18	<b>Private foundation.</b> If the organization die						
	instructions						

#### Red Oak ISD Education Foundation In Support Schedule for Organizations Described in Section 509(a)(2) Part III

(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.)

Calendar year (or fiscal year beginning in)   (a) 2018   (b) 2019   (c) 2020   (d) 2021   (e) 2022   (f) Total 1   (f) (f) (g) (g) 2022   (f) Total 1   (f) (g) (g) 2022   (f) Total 1   (g) 2022   (g) 2021   (g) 2022	Secti	on A. Public Support						
The continuous eny "innuous grains"   S7,898   49,297   90,975   67,437   91,841   357,448   35	Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
2 Gross receipts from admissions, merchandise solid or services performed, or facilities furnished in any activity that is related to the organization's bave-earth phapose	1	Gifts, grants, contributions, and membership fees						
2 Gross receipts from admissions, merchandine solid or services performed, or facilities furnished in any activity that is related to the organization's benefit and either paid to or expended on its behalf or expended on expended on its behalf or expended on e		received. (Do not include any "unusual grants.")	57,898	49,297	90,975	67,437	91,841	357,448
3 Gross receipts from activities that are not an unrelated trade or business under seatch of \$13 4 Tax revenues levided 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 10 and 10 state of the services of	2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
unrelated trade or business under section 513 4 Tax revenues levided for the organization's benefit and either paid to or expended on its behalf	_		95,015	170,599	154,801	136,885	153,694	710,994
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	3	•						
organization's benefit and either paid to or expended on its behalf								
or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge	4							
5 The value of services or facilities furnished by a governmental unit to the organization without charge		•						
furnished by a governmental unit to the organization without charge		•						
organization without charge	5							
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 dher than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c . Add lines 7a and 7b		· ·						
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 c Add lines 7a and 7b		<del>-</del>	152,913	219,896	245,776	204,322	245,535	1,068,442
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 c Add lines 7a and 7b	7a	Amounts included on lines 1, 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 c Add lines 7a and 7b		received from disqualified persons .						
persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b	b	Amounts included on lines 2 and 3						
c Add lines 7a and 7b  Public support. (Subtract line 7c from line 6.)		received from other than disqualified						
c Add lines 7a and 7b		persons that exceed the greater of \$5,000						
Rection B. Total Support   Subtract line 7c from		or 1% of the amount on line 13 for the year						
Inc 6.)   1,068,442	С	Add lines 7a and 7b						
Section B. Total Support   Calendar year (or fiscal year beginning in)   (a) 2018   (b) 2019   (c) 2020   (d) 2021   (e) 2022   (f) Total	8	Public support. (Subtract line 7c from						
Section B. Total Support   Calendar year (or fiscal year beginning in)   (a) 2018   (b) 2019   (c) 2020   (d) 2021   (e) 2022   (f) Total		line 6.)						1,068,442
9 Amounts from line 6	Secti	on B. Total Support						
Total support. (Add lines 9, 10c, 11, and 12.)	Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
payments received on securities loans, rents, royalties, and income from similar sources .  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b	9	Amounts from line 6	152,913	219,896	245,776	204,322	245,535	1,068,442
royalties, and income from similar sources .	10a	Gross income from interest, dividends,						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		payments received on securities loans, rents,						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b		royalties, and income from similar sources .	15,758	16,711	14,534	17,281	21,669	85,953
acquired after June 30, 1975	b	Unrelated business taxable income (less						
C Add lines 10a and 10b		section 511 taxes) from businesses						
Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))  Public support percentage for 2021 (Schedule A, Part III, line 15  Investment income percentage from 2021 Schedule A, Part III, line 17  Investment income percentage from 2021 Schedule A, Part III, line 17  33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  Investment income percentage from 2021 Schedule A, Part III, line 17  33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		acquired after June 30, 1975						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	С	Add lines 10a and 10b	15,758	16,711	14,534	17,281	21,669	85,953
or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	11	Net income from unrelated business	•					
or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		activities not included on line 10b, whether						
loss from the sale of capital assets (Explain in Part VI.)		or not the business is regularly carried on						
loss from the sale of capital assets (Explain in Part VI.)	12	Other income. Do not include gain or						
Total support. (Add lines 9, 10c, 11, and 12.)		loss from the sale of capital assets						
Total support. (Add lines 9, 10c, 11, and 12.)		(Explain in Part VI.)						
and 12.)	13	, ,						
First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))			168.671	236.607	260.310	221.603	267.204	1.154.395
organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	14	,						
Section C. Computation of Public Support Percentage  15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))		•	-			•	. ,	`
Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	Secti							
Public support percentage from 2021 Schedule A, Part III, line 15	15	Public support percentage for 2022 (line 8	, column (f), di	vided by line 1	3, column (f))		15	92.55 %
Section D. Computation of Investment Income Percentage	16	Public support percentage from 2021 Sch	edule A, Part II	I, line 15			16	
Investment income percentage from 2021 Schedule A, Part III, line 17	Secti	on D. Computation of Investment In-	come Percer	ntage			•	
Investment income percentage from 2021 Schedule A, Part III, line 17	17	Investment income percentage for 2022 (li	ne 10c, colum	n (f), divided by	line 13, colun	nn (f))	17	7.00 %
<ul> <li>19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</li> <li>b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</li> </ul>	18	Investment income percentage from 2021	Schedule A, P	art III, line 17			18	
17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization <b>b</b> 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		•			on line 14, an	d line 15 is mo	re than 33 1/39	
b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		• •						_
line 18 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	b		_					_
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		line 18 is not more than 33 1/3%, check this box	and <b>stop here.</b> T	he organization	qualifies as a pub	olicly supported o	rganization	
	20	Private foundation. If the organization did	d not check a b	oox on line 14,	19a, or 19b, ch	eck this box ar	nd see instructi	ons

Yes No

#### Part IV **Supporting Organizations**

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

#### Section A. All Supporting Organizations

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

		res	NO
	1		
	2		
	3a		
)	3b		
,	3с		
	4a		
	4b		
	4c		
	5a		
	=1.		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	10b		
-du		orm 990	n) 2022

EEA Schedule A (Form 990) 2022

ıaıı	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in <b>Part VI.</b>	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in 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		
Secti	on 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	instru	ıction	s).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions	s).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

	e A (Form 990) 2022 Red Oak ISD Education Foundation In		05-05239	72	Page 6
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trus	t on Nov. 20, 1970 <i>(explain</i>	in Part VI). S	ee
	instructions. All other Type III non-functionally integrated supporting organization	zatio	ns must complete Sections	A through E.	
Socti	on A - Adjusted Net Income		(A) Prior Year	(B) Current	Year
<u> </u>	on A - Adjusted Net Income		(A) I Hol Teal	(optiona	al)
1_	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or collection				
	of gross income or for management, conservation, or maintenance of				
	property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current (optiona	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
	Average monthly value of securities	1a			
	Average monthly cash balances	1b			
c	Fair market value of other non-exempt-use assets	1c			
	Total (add lines 1a, 1b, and 1c)	1d			
е	<b>Discount</b> claimed for blockage or other factors				
	(explain in detail in <b>Part VI</b> ):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Secti	on C - Distributable Amount			Current Y	ear
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				

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

emergency temporary reduction (see instructions).

Schedule A (Form 990) 2022 EEA

Excess from 2022

е

Part	v   Type III Non-Functionally integrated 509(a)(3	) Supporting Organi	zations (continue	a)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	kempt purposes		1	
2	Amounts paid to perform activity that directly furthers exen	npt purposes of supporte	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in <b>Part</b>	VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	<b>Total annual distributions.</b> Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ns	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
С	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
•	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in <b>Part VI</b> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
•	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
•	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
<u>u</u>	Excess from 2019				
C	Excess from 2020				
d	Excess from 2021				
u					

EEA Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### SCHEDULE G (Form 990)

#### **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.

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

Department of the Treasury

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

Open to Public Inspection

Employer identification number

Red Oak ISD Education Foundation In 05-0523972 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants h Phone solicitations Special fundraising events С In-person solicitations d 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? If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (iv) Gross receipts (i) Name and address of individual (or retained by) (ii) Activity custody or control of (or retained by) or entity (fundraiser) from activity fundraiser listed in contributions? organization col. (i) Yes No 1 2 3 5 6 7 8 9 10 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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 greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through Golf Tournam Partner Pgm col. (c)) (total number) (event type) (event type) Revenue Gross receipts 58,340 45,099 50,255 153,694 2 Less: Contributions Gross income (line 1 minus 58,340 45,099 50,255 153,694 4 Cash prizes Noncash prizes 5,280 5,892 Rent/facility costs . . . . . . Direct Expenses 7,878 1,109 8,987 Food and beverages . . . . . 996 1,846 2,842 Other direct expenses 11,261 2,319 8,111 21,691 Direct expense summary. Add lines 4 through 9 in column (d) 10 39,412 Net income summary. Subtract line 10 from line 3, column (d) 11 114,282 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue . . . . . . . . 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs 5 Other direct expenses Yes No 6 Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: 9 Is the organization licensed to conduct gaming activities in each of these states? If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? If "Yes," explain:

### SCHEDULE I (Form 990)

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

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

Attach to Form 990.

2022 Open to Public Inspection

**Employer identification number** 

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

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

Red Oak ISD Education Foundation In 05-0523972 Part I **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? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of (g) Description of (h) Purpose of grant (book, FMV, appraisal, or government (if applicable) grant noncash assistance noncash assistance or assistance other) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) 3 Enter total number of other organizations listed in the line 1 table 

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistant
Supplemental Information. Pro	ovide the information re	equired in Part I li	ne 2 <sup>.</sup> Part III. colum	n (b): and any other addit	ional information

### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 05-0523972 Red Oak ISD Education Foundation In 01. Form 990 governing body review (Part VI, line 11) The 990 is reviewed by the executive director and treasurer prior to filing. 02. Conflict of interest policy compliance (Part VI, line 12c) Board members are required to sign a statement each year confirming there are no conflicts of interest. 03. Governing documents, etc, available to public (Part VI, line 19) Documents available to public upon request. Printing and copying charges may apply. 04. List of other fees for services expenses (Part IX, line 11g) Miscellaneous income from refunds. 05. List of other expenses (Part IX, line 24e) Other expenses detailed in attached statement.