Form 990

Return of Organization Exempt From Income Tax

.....

OMB No. 1545-0047 2022

Dep	artment	of the Treasury	Do not enter social security numbers on this form as it r Go to www.irs.gov/Form990 for instructions and the l	may be i	nade public.	LULJ Open to Public Inspection
					UN 30, 2024	<u>.</u>
	Check if applicab	le: C Name o	forganization	-	D Employer identificat	ion number
	Addre chang Name		ALTO PARTNERS IN EDUCATION			
	chang	ge Doing b	usiness as		77-0186364	1
	returr Final returr	Number	and street (or P.0. box if mail is not delivered to street address) Roo BOX 1557	om/suite	E Telephone number 650-329-39	90
	termi ated	2	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	5,459,028.
	Amer returr		ALTO, CA 94302		H(a) Is this a group retur	
	Appli tion		nd address of principal officer: LINDA LYON		for subordinates?	
	pend		AS C ABOVE		H(b) Are all subordinates includ	
T	Tax-ex	empt status: [X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	If "No," attach a list	. See instructions
	Websi		PAPIE.ORG		H(c) Group exemption n	
		f organization: [X Corporation Trust Association Other	L Year o	of formation: 2005 M S	tate of legal domicile: CA
Ρ	art I	Summary				
	1	Briefly describ	e the organization's mission or most significant activities: PALO A	LTO 1	PARTNERS IN E	DUCATION
2 u		<u>(PIE) R</u>	AISES MONEY TO PROVIDE ALL PALO ALTO) UNI	FIED SCHOOL I	DISTRICT
2	2	Check this bo	x if the organization discontinued its operations or disposed of	of more t	than 25% of its net assets	
	3	Number of vo	ting members of the governing body (Part VI, line 1a)			30
Č	4		lependent voting members of the governing body (Part VI, line 1b) \ldots			30
Activities & Governance	5		of individuals employed in calendar year 2023 (Part V, line 2a)			5
viti	6		of volunteers (estimate if necessary)			110
1 T	7a		d business revenue from Part VIII, column (C), line 12			0.
_	<u> </u> b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>		0.
					Prior Year	Current Year
٩	8		and grants (Part VIII, line 1h)		5,521,389.	5,391,585.
Revenue	9	•	ce revenue (Part VIII, line 2g)		0.	0.
A P	10		come (Part VIII, column (A), lines 3, 4, and 7d)		28,111.	67,443.
_	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,117,208.	5,459,028. 5,024,131.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		0.	<u> </u>
	14		to or for members (Part IX, column (A), line 4)		249,763.	255,618.
a a	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
sasnanx	loa		undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) 206, 378		••	•
Ц Х			es (Part IX, column (A), lines 11a-11d, 11f-24e)		183,224.	175,276.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,550,195.	5,455,025.
	19		expenses. Subtract line 18 from line 12		-695.	4,003.
7		Nevenue less			inning of Current Year	End of Year
Net Assets or	20	Total assets (I	Part X, line 16)		368,636.	372,639.
Asse	20		(Part X, line 26)		5,500.	5,500.
Net,	22		fund balances. Subtract line 21 from line 20		363,136.	367,139.
P	art II	Signatur			,	
		alties of perjury,	I declare that I have examined this return, including accompanying schedules and	d stateme	nts, and to the best of my kn	owledge and belief, it is

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer			Date	
-	LINDA LYON, EXECUTIVE DIR	ECTOR			
	Type or print name and title		0		
	Print/Type preparer's name	Preparer's signature 01	Date	Check	PTIN
Paid	NICK PETERSEN	V(clid49	101ersa 09/18/2	024 self-employed	P01274743
Preparer	Firm's name ROBERT LEE & ASSC	CIATES, LLP	1	Firm's EIN 27-	1155496
Use Only	Firm's address 999 W TAYLOR STRE	ET, STE A			
	SAN JOSE, CA 9512	6		Phone no. (408	3) 855-6770
May the IF	RS discuss this return with the preparer shown abo	ove? See instructions			X Yes No
LHA For	Paperwork Reduction Act Notice, see the sepa	rate instructions. 3320	01 12-21-23		Form 990 (2023)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

				Eorm 9	90 (202
4e	(Expenses \$ Total program service expenses	including grants of \$ 5 , 100 , 052 .) (Revenue \$)	
4d	Other program services (Describe on S				
4c	(Code:) (Expenses \$	including grants of	\$)	(Revenue \$	
4b	(Code:) (Expenses \$	including grants of	\$)	(Revenue \$	
	TRAINED STAFF WHO T		AND COMPARABLE CRI	EATIVE ARTS. IN	
	SPECIALISTS AND TEAC LEARNING. SCIENCE EI	NRICHMENT: PROGRAM	MS AND SPECIALISTS	5 WHO HELP SCIE	NCE
	DONATIONS TO GO DIRI FUNDS: CLASSROOM SU	PPORT: AIDES, ASS	ISTANTS, READING A		
	STAFF. DUE IN LARGE EXPENSES CONTINUE TO	O BE EXTREMELY LO	W, ALLOWING MORE 7	THAN 92% OF	
	UNIFIED SCHOOL DIST CONTRIBUTIONS CAN PA	AY FOR ADDITIONAL	AND MUCH NEEDED I	PAUSD TEACHERS	AND
	PALO ALTO PARTNERS CORGANIZATION DEVOTED	D EXCLUSIVELY TO I	RAISING MONEY FOR	ALL PALO ALTO	
4a		,100,052. including grants of			028.
4	Describe the organization's program se Section 501(c)(3) and 501(c)(4) organiz	ations are required to report the a			nd
	If "Yes," describe these changes on So	chedule O.			110
3	If "Yes," describe these new services of Did the organization cease conducting		ow it conducts, any program servi	ces? Yes	XNo
2			•		X No
	FUNDING. PIE'S VOLU	UNTEERS, IN PARTN	ERSHIP WITH PAREN	IS, SCHOOLS, AN	
	THE COMMUNITY TO PROSENUE TO P				IC
	PALO ALTO PARTNERS	IN EDUCATION (PIE			
1	Briefly describe the organization's miss	sion:			

Form 990 (2023)				IN	EDUCATION
Part IV Checklist of R	equired	Schedu	lles		

			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	X	
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		_X_
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		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			37
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			77
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			v
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
•	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			х
10	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		х
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		
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.			
•				
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	х	
h	Part VI		- 11	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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		X
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		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
332003	12-21-23	Form	990	(2023)

332003 12-21-23

3 2023.04020 PALO ALTO PARTNERS IN EDU 160103.1

Form 990 (2	2023)	PALO	ALTO	PARTNERS
Part IV	Checklist o	of Required	Schedu	les (continued)

PALO ALTO PARTNERS IN EDUCATION

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	1		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest 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	1		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
	Schedule K. If "No," go to line 25a	24a		X
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		X
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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	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	1		
	"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	1		
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		
	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	33		X 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	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		X X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Pa	Note: All Form 990 filers are required to complete Schedule O Ct V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	I
1 0	Charly if Cabady la O contains a response or note to any line in this Part V			
	Check if Schedule O contains a response or note to any line in this Part V			N -
4	Enter the number reported in box 2 of Form 1006. Enter 0, if not evaluable $ \mathbf{t} 2$		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3	-		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
U	and a gametric or and the second manifolding fullor for reportable payments to vehicles and reportable darming	1		

(gambling) winnings to prize winners?

332004 12-21-23

4 2023.04020 PALO ALTO PARTNERS IN EDU 160103.1

Х

Form 990 (2023)

1c

Form	990 (2023) PALO ALTO PARTNERS IN EDUCATION 77-0186	364	Р	age 5
Par				
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	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		x
b	If "Yes," enter the name of the foreign country			
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
52		5a		х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50 50		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			<u> </u>
Ua		60		x
h	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		
a	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ch.		
-	were not tax deductible?	<u>6b</u>		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	_		v
	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		X
	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	_		v
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		┝───
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		┝───
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
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		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		L
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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		X
	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		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			
332005	12-21-23	Form	990	(2023)
002000		1 0111		(

12150918	142001	160103.0
TUTO00		

0

⁵ 2023.04020 PALO ALTO PARTNERS IN EDU 160103.1

Form 99	0 (2023)
---------	----------

PALO ALTO PARTNERS IN EDUCATION

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

77-0186364 Page 6

X

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

		1 1	ام د		Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	30			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with any other				
	officer, director, trustee, or key employee?			2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervisio	on 🛛			
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?	, ,		8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
•	organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>			9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re		<u></u>	0		
	ter 21 Choice (This Section & requests information about policies not required by the internal Re	venue Code.)			Yes	No
10-	Did the examination have lead chapters, branches, or effiliates?		Г	10a	162	X
	Did the organization have local chapters, branches, or affiliates?			10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such ch	• • •	I	101		
				10b	v	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y before filing the	form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				37	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		·····	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "	,				
	on Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	I by independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
	Other officers or key employees of the organization		[15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent with a				
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure		<u></u>			
17	List the states with which a copy of this Form 990 is required to be filed CA					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ai	nd 990-T (section	501(c)(3)s	only)	availat	hle
	for public inspection. Indicate how you made these available. Check all that apply.			ony)	avana	010
		on Schodula ()				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	n on Schedule O) Inflict of interest r	olicy and	finan	rial	
	statements available to the public during the tax year.		, oney, and		nai	
	State the name, address, and telephone number of the person who possesses the organization's boo					
20			0.0			
20	MARIA DERRICK, PALO ALTO PARTNERS IN EDUCATION - 65	50-329-39	90			
20		50-329-39	90		990	

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

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

		I	mzu			ipen	Juic	i í	,	
(A)	(B)			_ (0				(D)	(E)	(F)
Name and title	Average	(do	not cl		ition more		one	Reportable	Reportable	Estimated
	hours per		, unles cer an					compensation	compensation	amount of
	week			uau		1/1/1/1/1/1/1		from	from related	other
	(list any	irecto						the	organizations (W-2/1099-MISC/	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	1099-NEC)	from the organization
	organizations	ruste	l trus		/ee	npen		1099-NEC)	1033-1120)	and related
	below	dual t	utiona	-	nploy	st coi	ar			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			e.gam_anone
(1) LINDA LYON	40.00									
EXECUTIVE DIRECTOR 7/1/23-6/30/24		1		х				171,626.	0.	0.
(2) ABBY DOMINE	5.00									
DIRECTOR OF DEVELOPMENT - LCC 7/1/23		Х						0.	0.	0.
(3) AMIE FRANCONI	10.00									
VP OF DEVELOPMENT - LCC 7/1/23-6/30/		Х		Х				0.	0.	0.
(4) ANDREA LEVESQUE	5.00									
DIRECTOR OF DEVELOPMENT - LCC 7/1/23		Х						0.	0.	0.
(5) ANGIE SANAEE	5.00									
DIRECTOR OF DEVELOPMENT - SCHOOLS 7/		Х						0.	0.	0.
(6) BHARTI JINDAL	5.00									_
DIRECTOR OF DEVELOPMENT - LCC 7/1/23		Х						0.	0.	0.
(7) BRYNA LEE	5.00									
DIRECTOR OF DEVELOPMENT - LCC 7/1/23		Х						0.	0.	0.
(8) CASSY CHRISTIANSON	5.00									
DIRECTOR OF DEVELOPMENT - LCC 4/1/24		Х						0.	0.	0.
(9) CHRISTINA LOHMEYER	5.00									
DIRECTOR OF DEVELOPMENT - SCHOOLS 4/		Х						0.	0.	0.
(10) CHRISTINE ROPER	5.00									_
DIRECTOR OF DEVELOPMENT - LCC 7/1/23		Х						0.	0.	0.
(11) JENNIFER LEE	15.00									
EXECUTIVE VP 7/1/23-3/31/24, PRESIDE		Х		Х				0.	0.	0.
(12) JENNIFER SCHULTZ	5.00								•	0
DIRECTOR OF MARKETING - 7/1/23-6/30/	10.00	Х						0.	0.	0.
(13) JOE PODULKA	10.00			37					0	0
VP OF F&A 4/1/24-6/30/24	E 00	Х		Х				0.	0.	0.
(14) JOYCE FARNSWORTH	5.00	v						0.	0.	0
DIRECTOR OF DEVELOPMENT - SCHOOLS 7/	15.00	Х						0.	0.	0.
(15) KAITLYN LIAO VP OF MARKETING 7/1/23-3/31/24, EXEC	13.00	x		х				0.	0.	0
(16) KAREN KESNER	10.00			Δ				0.	0.	0.
VP OF DEVELOPMENT - SCHOOLS 7/1/23-6	10.00	х		х				0.	0.	0.
(17) KARRIE CHEN	10.00			- 11				U .	0.	<u> </u>
ASSISTANT TREASURER 7/1/23-3/31/24		х		х				0.	0.	0.
332007 12-21-23	1					1			J J •	Form 990 (2023)
002007 12-21-20				-	-					(2020)

7

12150918 142001 160103.00

2023.04020 PALO ALTO PARTNERS IN EDU 160103.1

Form 990 (2023) PALO ALTO) PARTNE	RS	I	N	ED	DUC	AТ	ION	77-0186	5364	Pa	.ge 8
Part VII Section A. Officers, Directors, Trust	ees, Key Emp	oloye	ees,	anc	l Hig	ghes	st C	ompensated Employee	s (continued)			
(A)	(B)				C)			(D)	(E)		(F)	
Name and title	Average			Pos	ition			Reportable	Reportable	Fs	timated	d
	hours per		not ch , unles					compensation	compensation		nount c	
	week		cer an					from	from related		other	
	(list any	ector						the	organizations	com	pensat	ion
	hours for	r dire				ted		organization	(W-2/1099-MISC/	fro	om the	•
	related	stee c	ruste			ensa		(W-2/1099-MISC/	1099-NEC)		anizatio	
	organizations below	al tru	o nal t		loyee	li com		1099-NEC)			relate	
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			orga	nizatio	ns
		Inc	ц.	θ	Key	E, E	오					
(18) LAUREN GOODY DIRECTOR OF DEVELOPMENT - LCC 8/28/2	5.00	х						0.	0.			0
(19) LINOR LEVAV	5.00	^						0.	0.			0.
DIRECTOR OF GOVERNANCE - 4/1/23-11/8	5.00	х						0.	0.			0.
(20) MANOJ BATRA	5.00	Δ				-		0.	0.			0.
SECRETARY 7/1/23-6/30/24	5.00	х		х				0.	0.			0.
(21) MARIA DERRICK	10.00			21								••
TREASURER 7/1/23-6/30/24	10.00	х		х				0.	0.			0.
(22) MELINA PATTERSON	10.00											<u> </u>
VP OF GOVERNANCE 7/1/23-6/30/24		х		Х				0.	0.			0.
(23) MIGUEL LOPEZ	5.00											
DIRECTOR OF F & A - TEACHER GRANTS 7		х						0.	0.			0.
(24) MIRANDA JUNOWICZ	5.00											
DIRECTOR OF MARKETING - 7/1/23-6/30/		х						0.	0.			0.
(25) MOLLY MELIUS	5.00											
DIRECTOR OF GOVERNANCE - 12/4/23-6/3		Х						0.	0.			0.
(26) MONICA TAN	5.00											
DIRECTOR OF MARKETING - 7/1/23-6/30/		Х						0.	0.			0.
1b Subtotal								171,626.	0.	_		0.
c Total from continuation sheets to Part VI	, Section A							0.	0.	_		0.
d Total (add lines 1b and 1c)								171,626.	0.			0.
2 Total number of individuals (including but no	ot limited to the	ose	liste	d ab	ove) wh	o re	eceived more than \$100,0	000 of reportable			
compensation from the organization												1
											Yes	No
3 Did the organization list any former officer,			•	•	-		Ŭ	• •				37
line 1a? If "Yes," complete Schedule J for su										3	_	X
4 For any individual listed on line 1a, is the su	-								-		v	
and related organizations greater than \$150										4	X	
5 Did any person listed on line 1a receive or a									iual for services	5		х
rendered to the organization? <i>If</i> "Yes," <i>com</i> Section B. Independent Contractors	blete Schedule	<u>, J T</u>	or su	<u>cn </u>	oers	on .				5		21
1 Complete this table for your five highest cor	nnensated ind	ener	nder	nt co	ontra	acto	rs th	nat received more than \$	100 000 of compens	ation fro	m	
the organization. Report compensation for t												
(A)	ine euleriau je			<u>g</u>				(B)		(C	;)	
Name and business	address	NC	ONE	1				Description of s	ervices	Comper	sation	l .
							\neg					
							\dashv					
2 Total number of independent contractors (ir	ncludina but na	ot lin	nited	to	thos	se lis	ted	above) who received mo	ore than			

\$100,000 of compensation from the organization 0
SEE PART VII, SECTION A CONTINUATION SHEETS

332008 12-21-23

Form **990** (2023)

0

Part VII Section A. Officers, Directors, Tru	istees. Kev Er	olan	vee	s. ar	nd H	liah	est (Compensated Employe	es (continued)	
(A)	(B)	<u> </u>		, u.				(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cł	heck	all t	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	r				loyee		the	organizations	compensation
	(list any hours for	directo				d em p		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	ee or (stee			nsated		(00-2/1033-10130)		and related
	organizations	Individual trustee or director	Institutional trustee		o yee	Highest com pen sated em ployee				organizations
	below	vidual	tutior	er	Key employee	lest c	Former			-
	line)	Indi	Insti	Officer	Key	High	Forn			
(27) ORE ADEYEMI	5.00								0	•
DIRECTOR OF DEVELOPMENT - LCC 4/1/24	10.00	Х						0.	0.	0.
(28) ORIT VIDAS-HOROVITZ	10.00	x		х				0.	0.	0
ASSISTANT TREASURER 4/1/24-6/30/24 (29) PATRICK SULLIVAN	10.00			<u> </u>		-		0.	0.	0.
VP OF F&A 7/1/23-3/31/24	10.00	x		х				0.	0.	0.
(30) RACHAELL MONDINO	5.00			Δ		-		· · ·	0.	0.
DIRECTOR OF DEVELOPMENT - SCHOOLS 7/	5.00	x						0.	0.	0.
(31) ROCHNA DHAND	5.00									
DIRECTOR OF DEVELOPMENT - SCHOOLS 4/		x						0.	0.	0.
(32) SHERI SHAMDASANI	5.00									
DIRECTOR OF DEVELOPMENT - SCHOOLS 7/		х						0.	0.	0.
(33) SOPHIA CHE	5.00									
DIRECTOR OF DEVELOPMENT - SCHOOLS 4/		х						0.	Ο.	0.
(34) STEPHANIE FRICK	15.00									
PRESIDENT 7/1/23-3/31/24		Х		Х				0.	0.	0.
(35) SUE KRAMER	5.00									
DIRECTOR OF MARKETING - 7/1/23-3/31/		Х						0.	0.	0.
(36) SUMITA PANDIT	5.00									_
DIRECTOR OF DEVELOPMENT - SCHOOLS 5/		Х						0.	0.	0.
(37) TERESA MOYE	5.00								0	0
DIRECTOR OF DEVELOPMENT - LCC 7/1/23	10.00	X						0.	0.	0.
(38) WEI WANG	10.00			77				0	0	0
VP OF MARKETING 4/1/24-6/30/24	5.00	X		Х				0.	0.	0.
(39) WENDY LEUNG DIRECTOR OF DEVELOPMENT - LCC 4/1/24	5.00	х						0.	0.	0.
(40) YVETTE MANGALINDAN	5.00	~						0.	0.	0.
DIRECTOR OF DEVELOPMENT - SCHOOLS 7/	5.00	х						0.	0.	0.
		1								
	-	•				-				

332201 04-01-23

Contributions, Gifts, Grants and Other Similar Amounts			Check if Schedule O c					(A)	(B)	(C)	(D)
ontributions, Gifts, Grants nd Other Similar Amounts								(A) Total revenue	Related or exempt	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ontributions, Giffs, Gran nd Other Similar Amoun		а	Federated campaigns		1a						
contributions, Gifts, G nd Other Similar Amo		b	Membership dues		1b						
ontributions, Gifts nd Other Similar /		с	Fundraising events		1c						
ontributions, G nd Other Simila			Related organizations								
ontribution: nd Other Si			Government grants (contri								
ontribut nd Other			All other contributions, gifts, g								
ontri nd O			similar amounts not included	abov	e 1 f	5,	391,585.				
ōĕ		g	Noncash contributions included in I	lines 1	a-1f 1g \$;	107,922.				
ວຄ		h	Total. Add lines 1a-1f					5,391,585.			
							Business Code				
e	2	а									
Program Service Revenue											
Ser		с									
E a		d									
л В С		e									
Pro			All other program service r	rever	nue	_					
			Total. Add lines 2a-2f								
	3		Investment income (includ								
	-		other similar amounts)	•			•	67,443.			67,443.
	4		Income from investment o								
	5		Royalties		•						
	Ū				(i) Real		(ii) Personal				
	6	а	Gross rents	6a							
			Less: rental expenses	6b							
	c Rental income or (loss) 6c				•						
			Gross amount from sales of	·	(i) Securit		(ii) Other				
	'		assets other than inventory	7a							
			Less: cost or other basis	<i>1</i> a							
Ð				7b							
Revenue				70 7c							
eve			Net gain or (loss)	· · · ·							
er B											
Othe	0		Gross income from fundraisin including \$								
0			contributions reported on								
			-		-	0.					
			Part IV, line 18			8a					
						8b					
			Net income or (loss) from f		Ū						
	9		Gross income from gaming	-							
			Part IV, line 19			9a					
			Less: direct expenses			9b					
			Net income or (loss) from g	•	•	°					
-	10		Gross sales of inventory, le								
			and allowances			<u>10a</u>					
			Less: cost of goods sold			10b					
-+		С	Net income or (loss) from s	sales	of inventor	у					
s							Business Code				
ie eor	11	а									
scellaneo <u>Revenue</u>		b									
Sev l		С									
Miscellaneous <u>Bevenue</u>			All other revenue								
		e	Total. Add lines 11a-11d		<u></u>				-	-	
	12		Total revenue. See instructio	ns				5,459,028.	0.	0.	67,443. Form 990 (2023

PALO ALTO PARTNERS IN EDUCATION

332009 12-21-23

Form 990 (2023)

10 2023.04020 PALO ALTO PARTNERS IN EDU 160103.1

Page **9**

77-0186364

PALO ALTO PARTNERS IN EDUCATION 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).

	Check if Schedule O contains a respons	e or note to any line in t	his Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,024,131.	5,024,131.		
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 5	Benefits paid to or for members Compensation of current officers, directors,				
Ŭ	trustees, and key employees	171,626.	42,907.	42,906.	85,813.
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	60,867.	15,216.	15,217.	30,434.
8 9	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits				
10	Payroll taxes	23,125.	5,781.	5,782.	11,562.
11	Fees for services (nonemployees):	-	-		-
а	Management				
	Legal	01 550		01 550	
	Accounting	21,553.		21,553.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17 Investment management fees				
f	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	15,429.			15,429.
13	Office expenses	1,411.	217.	759.	435.
14	Information technology	5,477.		1,371.	4,106.
15	Royalties				
16	Occupancy	32,979.	8,245.	8,245.	16,489.
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings				
20 21	Payments to affiliates				
21	Depreciation, depletion, and amortization				
23	Insurance	14,221.	3,555.	3,555.	7,111.
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 0.)				
а	BANK FEES	43,478.		43,478.	
b	TRAINING & DEVELOPMENT	21,815.		1,615.	20,200.
с	DONOR EVENTS	10,999.			10,999.
d	ANNUAL REPORT	3,800.			3,800.
е	All other expenses	4,114.	F 100 0F0	4,114.	000 000
25	Total functional expenses. Add lines 1 through 24e	5,455,025.	5,100,052.	148,595.	206,378.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

11

12150918 142001 160103.00

33

Total liabilities and net assets/fund balances

368,636.

33

372,639.

Form 990 (2023)

			TN	EDUCATION
PALO	ALTO	PARTNERS	TIN	EDUCATION

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

(B) End of year (A) Beginning of year 1 1 Cash - non-interest-bearing 348,570. 352,999. 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3 Accounts receivable, net 4 4 Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined 6 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 7 Notes and loans receivable, net 8 Inventories for sale or use 8 20,066. 19,640. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 25,352. basis. Complete Part VI of Schedule D _____ 10a 25,352. 0. 0. b Less: accumulated depreciation 10b 10c 11 11 Investments - publicly traded securities Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 368,636. 372,639. 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 5,500. 5,500. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties 23 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 25 of Schedule D 5,500. 5,500. 26 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 358,636. 27 363,736. 27 Net assets without donor restrictions 4,500. Net assets with donor restrictions 3,403. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 363,136. 367,139. Total net assets or fund balances 32 32

Assets

Liabilities

Net Assets or Fund Balances

-orm 990 (2023)		FAD
Part X	Balar	ice Shee	t

Form	1 990 (2023) PALO ALTO PARTNERS IN EDUCATION	<u>77-01</u>	86364	Pa	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,459		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,455		
3	Revenue less expenses. Subtract line 2 from line 1	3			03.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	363	,1	<u>36.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	367	,1	<u>39.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form 990 (2023)

332012 12-21-23

SCHEDULE A	١
------------	---

Department of the Treasury Internal Revenue Service

(Form 990)

Total

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2023
Open to Public Inspection

Name	of the organization						Employer	identification number	
	PALO	O ALTO PART	NERS IN EDUCA	ATION			7	7-0186364	
Par	I Reason for Public	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.		
The or	ganization is not a private foun								
1	A church, convention of c	hurches, or associatio	on of churches described	in sectio	on 170(b)(1)(A)(i).			
2	A school described in sec	tion 170(b)(1)(A)(ii).	(Attach Schedule E (Form	n 990).)					
3	A hospital or a cooperative	e hospital service org	anization described in se	ection 170)(b)(1)(A)(ii	i).			
4	A medical research organi	zation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
	city, and state:								
5	An organization operated	for the benefit of a co	llege or university owned	or operat	ed by a go	vernmental u	nit describe	ed in	
	section 170(b)(1)(A)(iv). (Complete Part II.)								
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7 [X An organization that norm	ally receives a substa	antial part of its support fr	om a gove	ernmental	unit or from th	ne general p	oublic described in	
	section 170(b)(1)(A)(vi).	Complete Part II.)							
8	A community trust describ	oed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)					
9	An agricultural research or	rganization described	l in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college	
	or university or a non-land	-grant college of agric	culture (see instructions).	Enter the i	name, city	, and state of	the college	or	
	university:								
10	An organization that norm	ally receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from	
	activities related to its exe	mpt functions, subje	ct to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support f	rom gross investment	
	income and unrelated bus	iness taxable income	e (less section 511 tax) fro	m busines	sses acquii	red by the org	anization a	Ifter June 30, 1975.	
	See section 509(a)(2). (Co	omplete Part III.)							
11	An organization organized	and operated exclus	ively to test for public sat	ety. See	section 50)9(a)(4).			
12	An organization organized	-	•				-		
	more publicly supported o							Check the box on	
	lines 12a through 12d that	• •			-		-		
а			supervised, or controlled	• • • •	-				
			gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	ipporting	
	organization. You must	-							
b			d or controlled in connect			•		-	
	-		anization vested in the sa	ame perso	ns that coi	ntrol or manag	ge the supp	oorted	
	organization(s). You mu								
С			ng organization operated				ly integrate	d with,	
			s). You must complete I	-		-			
d			porting organization oper				-		
	•		zation generally must sat mplete Part IV, Sections	-		-	an attentiv	/eness	
•	1 1	,	written determination from	,					
е			mally integrated supporti			Type I, Type	п, туре п		
f	Enter the number of supported			iy organiz	ation.				
	Provide the following information	•	ed organization(s)						
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of	monetary	(vi) Amount of other	
	organization		(described on lines 1-10 above (see instructions))	in your governi Yes	No	support (see ir	structions)	support (see instructions)	

Schedule A (Form 990) 2023 Part II Support Sch

PALO ALTO PARTNERS IN EDUCATION

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	6490446.	5218812.	5389432.	5521389.	5391585.	28011664.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	6400446	F010010	F200420	5501200	5201505	00011664
	Total. Add lines 1 through 3	6490446.	5218812.	5389432.	5521389.	5391585.	28011664.
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,						2020660
•	column (f)						<u>3820669.</u> 24190995.
	Public support. Subtract line 5 from line 4.						24190995.
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	6490446.	5218812.	5389432.	5521389.	5391585	28011664.
8	Gross income from interest,	01901100	52100121	55651521	55215051	33313031	
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	48,055.	1,435.	2,115.	28,111.	67,443.	147,159.
a	Net income from unrelated business	10,0331	1,1001	271131	20,111	0//1100	11//1000
5	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						28158823.
	Gross receipts from related activities,	etc. (see instructio	uns)			12	
	First 5 years. If the Form 990 is for th			ourth. or fifth tax v	/ear as a section 5		
	organization, check this box and stop	-		-			
See	ction C. Computation of Publi		centage				
14	Public support percentage for 2023 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	85.91 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	86.54 %
	33 1/3% support test - 2023. If the o					ore, check this bo	x and
	stop here. The organization qualifies						V
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	upported organiza	ition			
17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported or	rganization		
b	10% -facts-and-circumstances test	- 2022. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	istances test, cheo	ck this box and st	t op here. Explain i	n Part VI how the	
	organization meets the facts-and-circl		•				
18	Private foundation. If the organization	on did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instruction	s
						Schedule A	(Form 990) 2023

332022 12-21-23

Schedule A (F	⁻ orm 990) 2023
---------------	----------------------	--------

PALO ALTO PARTNERS IN EDUCATION Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

ocotion A. I upilo ouppoit						
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support	_ .	•		•	•	
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for check this box and stop here	0		-			
Section C. Computation of Pub	lic Support Per	rcentage				
15 Public support percentage for 2023	(line 8, column (f), c	livided by line 13,	column (f))		15	%
16 Public support percentage from 202 Section D. Computation of Inve					16	%
17 Investment income percentage for 2			ine 13 column (f))		17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2023. If th						
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2022. If th	-	•		• •		
line 18 is not more than 33 1/3%, ch	-					
20 Private foundation. If the organizat						лт <u></u>
332023 12-21-23	ION UIU NOL CHECK A	DOA OFFICE 14, 19		1115 DUX allu SEE 1113		e A (Form 990) 2023
UULULU 12-21-2U		16	5		Schedul	5 / (i orini 330) 2023

2023.04020 PALO ALTO PARTNERS IN EDU 160103.1

1

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).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

17

332024 12-21-23

2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990) 2023

PALO ALTO PARTNERS IN EDUCATION Schedule A (Form 990) 2023 Part IV Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a b A family member of a person described on line 11a above? 11b

c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in Part VI</u>

Section B. Type I Supporting Organizations

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? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
2	Did the organization operate for the benefit of any supported organization other than the supported	

organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

upervised, or controlled the supporting organization. Section 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		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b

c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	ee instruction <u>s).</u>
---	---------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

Yes No 2a 2b 3a 3b

332025 12-21-23

Schedule A (Form 990) 2023

11c

1

2

Yes

No

2023.04020 PALO ALTO PARTNERS IN EDU 160103.1

18

Schedule A (Form	990) 2023
--------------	------	-----	--------

Schedule A	(Form 990)	2023	PALO	ALTO	PARTNERS	IN	EDUCATION	
Part V	Type III	Non-	Functionally In	tegrate	d 509(a)(3) Su	opor	ting Organizatior	IS

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

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

Schedule A (Form 990) 2023

332026 12-21-23

1	1 Amounts paid to supported organizations to accomplish exempt purposes					
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported				
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	6	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - prior	ovide details in Part VI)		5		
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2023 from Section C, line 6			9		
10 Line 8 amount divided by line 9 amount						
10				10		
	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023			
			Underdistribution			
Sect	on E - Distribution Allocations (see instructions)		Underdistribution			
Secti	on E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6		Underdistribution			
Secti	on E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reason-		Underdistribution			
Secti 	on E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reason- able cause required - <i>explain in</i> Part VI). See instructions.		Underdistribution			
Secti 1 2 3 a	on E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reason- able cause required - <i>explain in</i> Part VI). See instructions. Excess distributions carryover, if any, to 2023		Underdistribution			
Secti 	on E - Distribution Allocations (see instructions) Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reason- able cause required - <i>explain in</i> Part VI). See instructions. Excess distributions carryover, if any, to 2023 From 2018		Underdistribution			

PALO ALTO PARTNERS IN EDUCATION

Current Year

(iii) Distributable

Amount for 2023

Schedule A (Form 990) 2023

	line 7:	\$
а	Applied to underdistribution	ons of prior years

4

7

8

a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

e From 2022

f Total of lines 3a through 3e

g Applied to underdistributions of prior years h Applied to 2023 distributable amount

Distributions for 2023 from Section D,

b Applied to 2023 distributable amount

i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.

c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2023, if

than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2023. Subtract lines 3h

and 4b from line 1. For result greater than zero, explain in
Part VI. See instructions.
Excess distributions carryover to 2024. Add lines 3j
and 4c.
Breakdown of line 7:

any. Subtract lines 3g and 4a from line 2. For result greater

Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions

Form 990) 2023					EDUCAT		11-	0186364	Page
Supplemental Part IV, Section A, line 1; Part IV, Sec Section D, lines 5,	lines 1, 2, 3b, 3c, tion D, lines 2 and	4b, 4c, 5a 3; Part IV,	, 6, 9a, 9b, 9c Section E, lir	c, 11a, 11b nes 1c, 2a,	, and 11c; Pa 2b, 3a, and	art IV, Section 3b; Part V, line	B, lines 1 and 2; 1; Part V, Section	Part IV, Sectior on B, line 1e; Pa	n C, irt V,
(See instructions.)	6, and 8; and Par	t v, Section	1 E, lines 2, 5	, and 6. Als	so complete	this part for an	y additional info	mation.	

(Form	990)
-------	------

Supplemental Financial Statements

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



Department of the Treasury nal Revenue Service

-	e of the organization PALO ALTO PARTNERS				entification n	umber
Par			or Ac			T
1 41	organization answered "Yes" on Form 990, Part IV, lir				implete il trie	
		(a) Donor advised funds	()) Funds and o	ther accounts	
1	Total number at and of year		(,			
2	Total number at end of year Aggregate value of contributions to (during year)					
2	Aggregate value of grants from (during year)					
4	Aggregate value of grants norm (during year)					
5	Did the organization inform all donors and donor advisors in		ed fund	e		
5	are the organization's property, subject to the organization's	0			Yes	No
6	Did the organization inform all grantees, donors, and donor a				103	NO
U	for charitable purposes and not for the benefit of the donor of					
				•	Yes	No
Par					100	110
1	Purpose(s) of conservation easements held by the organizati					
•	Preservation of land for public use (for example, recrea		a histo	rically importa	nt land area	
	Protection of natural habitat	Preservation of				
	Preservation of open space		u oortii		aotaro	
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	of a con	servation ease	ement on the l	ast
-	day of the tax year.]		the End of the T	
а	Total number of conservation easements		ĺ	2a		
			r	2b		
c	Number of conservation easements on a certified historic str			2c		
d	Number of conservation easements included on line 2c acqu					
	on a historic structure listed in the National Register			2d		
3	Number of conservation easements modified, transferred, re				ne tax	
	year		0	U		
4	Number of states where property subject to conservation ea	sement is located				
5	Does the organization have a written policy regarding the pe					
	violations, and enforcement of the conservation easements i			[Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting,				uring the year	
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion eas	ements during	the year	
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(h)(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?				Yes	No
9	In Part XIII, describe how the organization reports conservat					
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial stateme	ents tha	t describes the	e	
	organization's accounting for conservation easements.		_			
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	her Si	milar Asse	ts.	
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement a	nd bala	nce sheet wor	ks	
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education, or research in fu	irtherand	ce of public		
	service, provide in Part XIII the text of the footnote to its fina	ncial statements that describes these item	IS.			
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and I	balance	sheet works o	f	
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furth	nerance	of public servi	ce,	
	provide the following amounts relating to these items.					
	(i) Revenue included on Form 990, Part VIII, line 1			\$		
	(ii) Assets included in Form 990, Part X			\$		
2	If the organization received or held works of art, historical tre			rovide		
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:				
а	Revenue included on Form 990, Part VIII, line 1			\$		
b	Assets included in Form 990, Part X			\$		

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2023
332051 09-28-23	

12150918 142001 160103.00

40

2023.04020 PALO ALTO PARTNERS IN EDU 160103.1

		TO PARTNERS					7	7-01	86364	Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, His	torical Tre	easures, o	r Other	Similar A	Assets	contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	s, chec	k any of the t	following that	t make sig	nificant use	e of its		
	collection items (check all that apply).									
а	Public exhibition	d		Loan or exc	hange progra	am				
b	Scholarly research	е		Other						
с	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	n how t	hey further th	ne organizatio	on's exem	pt purpose	in Part	XIII.	
5	During the year, did the organization solicit o					er similar a	assets			
Dee	to be sold to raise funds rather than to be ma								Yes	No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pau		te if the	e organizatior	n answered "	Yes" on F	orm 990, P	art IV, li	ne 9, or	
1a	Is the organization an agent, trustee, custodi	an, or other intermed	diary fo	r contributior	ns or other as	sets not ir	ncluded			
	on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing	table:						
									Amount	
с	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or cu	ustodial acco	unt liabilit	y?	L	Yes	No
_	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds Complete if									
		(a) Current year	(b)	Prior year	(c) Two yea	rs back 🚺	d) Three yea	rs back	(e) Four	years back
	Beginning of year balance									
b	Contributions									
с	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	rent year end balance	e (line 1	lg, column (a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
с		%								
	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ssion of the organiza	ation th	at are held ar	nd administer	red for the			Г	
	organization by:									Yes No
	(i) Unrelated organizations?								3a(i)	
	(ii) Related organizations?								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza								3b	
4 Par	Describe in Part XIII the intended uses of the t VI Land, Buildings, and Equipm		wment	tunds.						
1 41	Complete if the organization answere) Part I	V line 11a S	See Form 990	Part X li	ne 10			
	Description of property									
	Description of property	(a) Cost or o basis (investr		• •	t or other (other)	.,	cumulated reciation		(d) Book	value
10	Land		liony	02313		ucp	Colucion			
	Land									
b	Buildings Leasehold improvements							-+		
	Equipment Other			2	5,352.		25,352	2		0.
	. Add lines 1a through 1e. (Column (d) must e		V line				-			0.
1010		<u>'yuai ruiiii 990, Pan .</u>	<u>, iii ie</u>		برم				D (Form	990) 2023
							30	mouule		2001 2020

Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-vear market value
	(b) BOOK value	(c) Method of Valuation. Cost of el	iu-or-year market value
Financial derivatives			
Closely held equity interests			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
tal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
art VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV line 1	11c See Form 990 Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-vear market value
(1)			
(2)			
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
tal. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Complete if the organization answered "Yes" (a)	on Form 990, Part IV, line 1 Description	11d. See Form 990, Part X, line 15.	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Part X Other Liabilities			-
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	The or This See Form 990, Part X, line 2	
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(5) (6)			
(5) (6) (7)			
(5) (6) (7) (8)			
(5) (6) (7)			

Schedule D (Form 990) 2023

332053 09-28-23

12150918 142001 160103.00

Schedule D (Form 990) 2023

Sche	dule D (Form 990) 2023 PALO ALTO PARTNERS IN	EDUCATION	77-(0186364 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial S	Statements With Revenu		¥
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			5,459,028.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			5,459,028.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	<u>12.</u>)		5,459,028.
Pa	t XII Reconciliation of Expenses per Audited Financial	Statements With Expen	ses per Returr	ו
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.		
1	Total expenses and losses per audited financial statements		1	5,455,025.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	<u>2</u> a		
b	Prior year adjustments	2b		
с	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			5,455,025.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lir	ne 18.)		5,455,025.
Pa	rt XIII Supplemental Information			

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

PART X, LINE 2:

THE ORGANIZATION EVALUATES ITS UNCERTAIN TAX POSITIONS AND WILL RECOGNIZE
A LOSS CONTINGENCY WHEN IT IS PROBABLE THAT A LIABILITY HAS BEEN INCURRED
AS OF THE DATE OF THE FINANCIAL STATEMENTS AND THE AMOUNT OF THE LOSS CAN
BE REASONABLY ESTIMATED. THE AMOUNT RECOGNIZED IS SUBJECT TO ESTIMATE AND
MANAGEMENT JUDGMENT WITH RESPECT TO THE LIKELY OUTCOME OF EACH UNCERTAIN
TAX POSITION. THE AMOUNT THAT IS ULTIMATELY SUSTAINED FOR AN INDIVIDUAL
UNCERTAIN TAX POSITION OR FOR ALL UNCERTAIN TAX POSITIONS IN THE AGGREGATE
COULD DIFFER FROM THE AMOUNT RECOGNIZED. AS OF THE YEAR END, MANAGEMENT
DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS.

43

332054 09-28-23

Schedule D	990)	2023

Part XIII Supplemental Information (continued)	
	Schedule D (Form 990) 2023

SCHEDULE I		G	rants and Oth	er Assistan	ce to Organ	izations,		OMB No. 1545-0047	7
(Form 990)		Go	vernments, an ete if the organization	d Individual	s in the Ŭni	ted States		2023	
Department of the Treasury		Compre		Attach to Form				Open to Public	с
Internal Revenue Service			Go to www.irs	.gov/Form990 for	the latest inform	ation.		Inspection	
Name of the organization								Employer identification num	
			IN EDUCATIO	ON				77-018636	54
	mation on Grants a								
1 Does the organizatio criteria used to award			-			r for the grants or assis			No
2 Describe in Part IV th	ne organization's pro	ocedures for monito	oring the use of grant	funds in the United	States.				
			ations and Domestic be duplicated if addition			anization answered "Y	es" on Form 990, Part	IV, line 21, for any	
1 (a) Name and addres or govern		(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
PALO ALTO UNIFIED SC 25 CHURCHILL AVE.	HOOL DISTRICT	04.01.00440	150/614	5 004 101					
PALO ALTO, CA 94306		94-2168440	170(C)1	5,024,131.	0.	FAIR MARKET		EDUCATIONAL SUPPORT	

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

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

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

Schedule I (Form 990) 2023

77-0186364

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Dart IV Supplemental Information Provide the information re	An uirad in Dart I. Iir		(b); and any other as	ditional information	1

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE ORGANIZATION REVIEWS DOCUMENTATION PROVIDED BY THE DISTRICT, WHICH HAS

SET ASIDE A SEPARATE AND IDENTIFIABLE ACCOUNT NUMBER FOR ALL EXPENDITURES

OF PIE FUNDS, AND HAS AN ANNUAL MEETING WITH EACH PRINCIPAL IN THE DISTRICT

TO FURTHER SUBSTANTIATE THAT GRANT FUNDS ARE USED FOR EDUCATIONAL PURPOSES

AND SPENT IN ACCORDANCE WITH ANNUALLY-SET FUNDING TARGETS FOR PAUSD'S

ELEMENTARY, MIDDLE, AND HIGH SCHOOLS. IN THE CASE OF GRANT FUNDS

DISTRIBUTED TO PAUSD TO FUND THE ORGANIZATION'S TEACHER GRANTS PROGRAM,

PURCHASE ORDERS AND/OR OTHER EXPENSE REIMBURSEMENT DOCUMENTATION ARE

Schedule I (Form 990) PALO ALTO PARTNERS IN EDUCATION	77-0186364 Page 2
Part IV Supplemental Information	
REQUIRED TO SUBSTANTIATE THAT FUNDS ARE USED FOR EDUCATI	ONAL PURPOSES AND
IN COMPLIANCE WITH THE GUIDELINES OF THE TEACHER GRANTS	PROGRAM WITH THE
TEACHER GRANT PROJECT APPLICATION APPROVED BY THE TEACHE	<u>R GRANTS COMMITTEE.</u>
332291	Schedule I (Form 990)
332291 04-01-23	

12150918 142001 160103.00

SC	HEDULE J	Compensation Information	1	OMB No. 1	1545-00	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	22	2
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20	20)
	rtment of the Treasury	Attach to Form 990.		Open to		ic
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.	Employer is	Inspe		
Nan	ne of the organizatior		Employer ic			mber
Da	rt I Question	PALO ALTO PARTNERS IN EDUCATION s Regarding Compensation	//-0	18636	4	
10		s negariting compensation			Vee	No
10	Chack the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	000		Yes	No
Id		line 1a. Complete Part III to provide any of the following to of for a person instea on Portini line 1a. Complete Part III to provide any relevant information regarding these items.	990,			
	First-class or c		معاد ادم			
	Travel for com	č				
		ation and gross-up payments Health or social club dues or initiation fee				
		pending account Personal services (such as maid, chauffer				
	Discretionary					
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
	•	rovision of all of the expenses described above? If "No," complete Part III to explain		1b		
2		require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
_		rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
		-,				
3	Indicate which, if ar	y, of the following the organization used to establish the compensation of the organization's	5			
		ctor. Check all that apply. Do not check any boxes for methods used by a related organizati				
		tion of the CEO/Executive Director, but explain in Part III.				
	X Compensation	committee Written employment contract				
	Independent c	ompensation consultant Compensation survey or study				
	Form 990 of o	her organizations X Approval by the board or compensation of	ommittee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re	ated organization:				
а	Receive a severanc	e payment or change-of-control payment?		. 4 a		X
b		eive payment from a supplemental nonqualified retirement plan?		4b		X
С	Participate in or rec	eive payment from an equity-based compensation arrangement?		4c		X
	If "Yes" to any of lir	es $4a \cdot c$, list the persons and provide the applicable amounts for each item in Part III.				
)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on			
	contingent on the re					37
а	The organization?			. <u>5a</u>		X
b		ation?		. 5b		X
~		r 5b, describe in Part III.				
6		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
_	contingent on the n	0		0		v
a	The organization?			. <u>6a</u>		X X
a		ation?		. <u>6b</u>		
7		r 6b, describe in Part III.				
1		n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		7		x
0		es 5 and 6? If "Yes," describe in Part III reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th		7		
8						x
9				8		- 21
9		d the organization also follow the rebuttable presumption procedure described in		9		
For	Regulations section	53.4958-6(c)? on Act Notice, see the Instructions for Form 990.			n 000	1 2022
1.01			Schedu		1 330	, 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC		(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) LINDA LYON	(i)	168,326.	3,300.	0.	0.	0.	171,626.	0.
EXECUTIVE DIRECTOR 7/1/23-6/30/24	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

PALO ALTO PARTNERS IN EDUCATION Schedule J (Form 990) 2023

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2023

Schedule J (Form 990) 2023

SCHED	ULE	Μ
(Form 9	90)	

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

Inspection

23

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

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

Name of the organization

PALO ALTO PARTNERS IN EDUCATION

Employer identification number					
77-0186364					

ſ ΖU **Open to Public**

Part I Types of Property

T ai							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of det noncash contribut		ts
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property	x	28	107,922.	E'MT7		
9	Securities - Publicly traded	A	20	107,922.	ГПЛ		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other $_{\dots}$						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ()						
26	Other ()						
27	Other ()						
28	Other (
29	Number of Forms 8283 received by the organiz	ation during	the tax vear for co	ontributions			
	for which the organization completed Form 828						
	5	, , ,	5			Yes	No
30a	During the year, did the organization receive by	/ contributio	n anv propertv rep	orted in Part I. lines 1 throug	h 28. that it		
	must hold for at least 3 years from the date of t						
	exempt purposes for the entire holding period?					30a	x
h	If "Yes," describe the arrangement in Part II.					000	<u> </u>
31	Does the organization have a gift acceptance p	olicy that re	ouires the review (of any nonstandard contribut	ions?	31 X	
	Does the organization hire or use third parties of		•	•		51 11	
52d			•			32a X	
L						528 1	
	If "Yes," describe in Part II.	olumn (a) fa	rotupo of propert	(for which column (a) is the	lkod		
33	If the organization didn't report an amount in co	olumn (c) to	r a type of property	r for which column (a) is chec	skeu,		
	describe in Part II.						

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

Schedule M (Form 990) 2023

LHA 332141 09-11-23 Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

LINE 32 MORGAN STANLEY SMITH BARNEY PROCESSES STOCK DONATIONS FOR THE

ORGANIZATION.

PART I COLUMN (B) REPRESENTS THE NUMBER OF DONORS, NOT THE NUMBER OF

ITEMS RECEIVED.

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.



PALO ALTO PARTNERS IN EDUCATION

Employer identification number 77 - 0186364

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

STUDENTS AN EDUCATIONAL EXPERIENCE BEYOND WHAT IS POSSIBLE WITH PUBLIC

FUNDING.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE COMMUNITY, WILL ENSURE EVERY STUDENT IN THE PALO ALTO UNIFIED

SCHOOL DISTRICT EXPERIENCES AN ENRICHED AND FULFILLING EDUCATION.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

MIDDLE SCHOOLS, PIE FUNDS: ACADEMIC ENRICHMENT: ADDITIONAL COURSES AND

CLASSROOM SUPPORT IN VIDEO PRODUCTION, CREATIVE WRITING, MUSIC AND

BIOTECHNOLOGY. STUDENT SUPPORT: PROGRAMS WHICH ADDRESS 6TH AND 8TH

GRADE TRANSITIONS; ACADEMIC GUIDANCE AND SUPPORT; AND CHARACTER

DEVELOPMENT. INSTRUCTIONAL TECHNOLOGY: MENTORS WHO ASSIST TEACHERS IN

APPLYING TECHNOLOGY TO CURRICULUM THAT ENHANCES STUDENT LEARNING. IN

HIGH SCHOOL, PIE FUNDS: COLLEGE AND CAREER COUNSELING: STAFFING TO

SUPPORT ADVISING AND RESOURCE PROGRAMS WHICH HELP ALL STUDENTS PLAN

WISELY FOR THE FUTURE. CAREER/TECHNOLOGY EDUCATION: ADDITIONAL COURSES

IN ENGINEERING, MEDIA TECHNOLOGY AND PERFORMING ARTS. INSTRUCTIONAL

TECHNOLOGY: MENTORS WHO ASSIST TEACHERS IN APPLYING TECHNOLOGY TO

CURRICULUM THAT ENHANCES STUDENT LEARNING.

FORM 990, PART VI, SECTION A, LINE 2:

BOARD MEMBERS, LINOR LEVAV AND MIRANDA JUNOWICZ, ARE SISTERS.

 FORM 990, PART VI, SECTION B, LINE 11B:

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

 LHA
 332211 11-14-23

53 3 04020 DATO

Schedule O (Form 990) 2023	Page 2
Name of the organization	Employer identification number
PALO ALTO PARTNERS IN EDUCATION	77-0186364
THE DRAFT OF THE FORM 990 IS SUBMITTED TO THE AUDIT COMMIT	TEE (A COMMITTEE
APPOINTED BY THE BOARD OF DIRECTORS). THE BOARD OR AUDIT	COMMITTEE IS
AUTHORIZED TO APPROVE THE FORM 990 FOR PUBLICATION IN ACCO	RDANCE WITH
PROCEDURES APPROVED BY THE BOARD OF DIRECTORS. A FINAL CO	PY OF THE FORM
990 IS PROVIDED TO EACH BOARD MEMBER VIA ELECTRONIC TRANSM	ISSION FROM THE
AUDIT COMMITTEE.	

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY. THE BOARD OF DIRECTORS, OFFICERS AND EMPLOYEES ARE EXPECTED TO USE GOOD JUDGMENT, TO ADHERE TO HIGH ETHICAL STANDARDS, AND TO CONDUCT THEIR AFFAIRS IN SUCH A MANNER AS TO AVOID ANY ACTUAL OR POTENTIAL CONFLICT BETWEEN THE PERSONAL INTEREST OF A DIRECTOR OR EMPLOYEE AND THOSE OF THE ORGANIZATION. BOTH THE FACT AND THE APPEARANCE OF A CONFLICT OF INTEREST ARE AVOIDED.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS REVIEWS THE COMPENSATION OF THE EXECUTIVE DIRECTOR (THE ORGANIZATION'S ONLY KEY EMPLOYEE) BASED UPON THE FOLLOWING: COMPENSATION IS REASONABLE AND APPROPRIATE IN TERMS OF THE ORGANIZATION'S REVENUES AND EXPENSES, COMPARABILITY WITH OTHER NONPROFITS, THE CALIBER OF SERVICES PROVIDED TO THE ORGANIZATION AND FOR FINANCIAL PLANNING.

THE ORGANIZATION DOES NOT COMPENSATE BOARD MEMBERS OR OFFICERS OF THE

ORGANIZATION (OTHER THAN THE EXECUTIVE DIRECTOR).

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION MAKES ITS FORM 1023 AND 990 AVAILABLE FOR PUBLIC 332212 11-14-23 54

12150918 142001 160103.00

2023.04020 PALO ALTO PARTNERS IN EDU 160103.1

Name of the organization PALO ALTO PARTNERS IN EDUCATION	Employer identification number 77-0186364
INSPECTION UPON REQUEST.	
~	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS ARTICLES OF INCORPORATION, BY	
INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO TH	E PUBLIC UPON
REQUEST.	
32212 11-14-23	Schedule O (Form 990) 202

2023 DEPRECIATION AND AMORTIZATION REPORT

FOI

FORM 990 PAGE 10 990															
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
2	UPDATE BLACKBAUD	09/11/05	SL	3.00		16	3,501.				3,501.	3,501.		0.	3,501.
3	FRYS1	07/17/11	SL	3.00		16	1,230.				1,230.	1,230.		0.	1,230.
4	FRYS2	02/12/12	SL	3.00		16	1,709.				1,709.	1,709.		0.	1,709.
5	ASUS ZENBOOK	08/16/12	SL	3.00		16	1,539.				1,539.	1,539.		0.	1,539.
				.000	ну	16									
				.000	ну	16									
				.000	ну	16									
	* 990 PAGE 10 TOTAL OTHER						7,979.				7,979.	7,979.		0.	7,979.
	PROGRAM SERVICES														
1	BLACKBAUD - RAISERS EDGE	07/07/05	SL	3.00		16	17,373.				17,373.	17,373.		0.	17,373.
	* 990 PAGE 10 TOTAL PROGRAM SERVICES						17,373.				17,373.	17,373.		0.	17,373.
	* GRAND TOTAL 990 PAGE 10 DEPR						25,352.				25,352.	25,352.		0.	25,352.

328111 04-01-23

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone