Department of the Treasury Internal Revenue Service

Short Form

OMB No. 1545-0047

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form, as it may be made public.

Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

A	For the	2022 calend	ar year, or tax year beginning , 2022, and ending		, 20		
В	Check if ap	k if applicable: C Name of organization D Er		D Employe	er identification number		
	Address c	ess change Early Learning Focus, Inc. 4			500425		
Ц		Number and street (or P.O. box if mail is not delivered to street address) Room/suite E T			ne number		
Н	Initial return/terminated 1715 Valence Street 5			5049001362			
H	Amended		City or town, state or province, country, and ZIP or foreign postal code	F Group	Exemption		
	Applicatio		New Orleans, LA 70115	Numbe	er		
G	Account	ting Method:	Cash X Accrual Other (specify):	Check 🛛 i	f the organization is not		
1.1	Website	www.	earlylearningfocus.org m	equired to	attach Schedule B		
J٦	Tax-exen	npt status (che	eck only one) — 🔀 501(c)(3) 🗌 501(c) () (insert no.) 🗌 4947(a)(1) or 🔲 527 🤇 (Form 990)).		
			X Corporation Trust Association Other:				
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total				
_			500,000 or more, file Form 990 instead of Form 990-EZ		\$ 18,293.		
P	art I		e, Expenses, and Changes in Net Assets or Fund Balances (see the i		•		
			the organization used Schedule O to respond to any question in this Part I	<u></u>	<u> X</u>		
	1		ons, gifts, grants, and similar amounts received	-	1 1,093.		
	2	•	ervice revenue including government fees and contracts		2 17,200.		
	3	Membersh	ip dues and assessments	· · 上:	3		
	4	Investmen		· · [4		
	5a		ount from sale of assets other than inventory 5a				
	b		or other basis and sales expenses				
	с 6	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a) 5c Gaming and fundraising events: 5c					
an	а		ome from gaming (attach Schedule G if greater than				
Revenue	b	from fundr	me from fundraising events (not including <u>\$</u> of contribution aising events reported on line 1) (attach Schedule G if the ch gross income and contributions exceeds \$15,000) 6b	IS			
	c d		e or (loss) from gaming and fundraising events		6d		
	7a	Gross sale	s of inventory, less returns and allowances 7a				
	b		of goods sold				
	С		it or (loss) from sales of inventory (subtract line 7b from line 7a)		'c		
	8		nue (describe in Schedule O)......................		8		
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9 18,293.		
	10		I similar amounts paid (list in Schedule O)		0		
	11				1		
Expenses	12		ther compensation, and employee benefits				
en	13		al fees and other payments to independent contractors		3 5,645.		
ц.	14		y, rent, utilities, and maintenance		4		
ш	1.0	0,1	ublications, postage, and shipping				
	16		enses (describe in Schedule O)		6 4,037.		
	17		enses. Add lines 10 through 16		7 9,682. 8 8,611.		
Net Assets	18 19	Net assets	(deficit) for the year (subtract line 17 from line 9)	with			
As			r figure reported on prior year's return)		19 19,119.		
let	20		nges in net assets or fund balances (explain in Schedule O)		20		
_	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	2	27,730.		

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2022)

REV 01/24/23 PRO

Form	990-EZ (2022)					Page 2
Pa	t II Balance Sheets (see the instructions f	,				
	Check if the organization used Schedule	O to respond to ar				
				(A) Beginning of year	(B) End of year
22	Cash, savings, and investments				22	27,730.
23	Land and buildings				23	
24	Other assets (describe in Schedule O)0				24	
25	Total assets		[19,119.	25	27,730.
26	Total liabilities (describe in Schedule O)				26	
27	Net assets or fund balances (line 27 of column	(B) must agree with	n line 21)	19,119.	27	27,730.
Par	t III Statement of Program Service Accom	plishments (see th	e instructions for P	art III)		
	Check if the organization used Schedule	O to respond to an	ny question in this I	Part III . 🗌	(D • •••	Expenses
Wha	t is the organization's primary exempt purpose?	Provide educ & developm	ent support to schools &	childcare centers		uired for section (3) and 501(c)(4)
	ribe the organization's program service accomplis				•	izations; optional for
	easured by expenses. In a clear and concise m		e services provided	, the number of	other	s.)
perse	ons benefited, and other relevant information for ea					
28	The Early Learning Resource and Training Center sustains and support					1
	developmentally appropriate materials available to teachers and providers, offering training in the ef	fective use of these materials and other	early education best practices, and plan	ning family engagement and parent		1
	education events. We normally serve over 250 children attending childcare centers, prek-K pro	ograms and the community public chart	er school and their families, but COV	ID-19 curtailed 2021 programs.		1
	(Grants \$ 0.) If this amount	includes foreign gra	ints, check here .	🔲	28a	6,867.
29	· · ·					
						1
						1
	(Grants \$) If this amount	includes foreign gra	ints, check here .		29a	1
30					29a	
30						1
						1
						1
	· · · · · · · · · · · · · · · · · · ·		ints, check here .		30a	
31	Other program services (describe in Schedule O)					1
	(Grants \$) If this amount	includes foreign gra	ints, check here .	🛯	31a	
	Total program service expenses (add lines 28a t				32	6,867.
Par					struc	tions for Part IV)
	Check if the organization used Schedule	O to respond to ar	ny question in this I	Part IV		<u> </u>
			(c) Reportable	(d) Health benefits,		
	(a) Name and title	(b) Average hours per week	compensation (Forms W-2/1099-MISC/	contributions to employe	e (e) E	Estimated amount of
	(a) Name and title	devoted to position	1099-NEC)	benefit plans, and		her compensation
			(if not paid, enter -0-)	deferred compensation		
Lis	a L. Schlakman					
	sident	30.00	0.	0.		0.
	id C. Schlakman					
	Treasurer		0.	0		0
		5.00	0.	0.		0.
	nifer Flinn	1 00		0		0
	retary	1.00	0.	0.		0.
	Glenda-Allen Jones					
	rd of Directors	1.00	0.	0.		0.
Dr.	Calvin Gidney					
Boa	rd of Directors	1.00	0.	0.		0.
Mr.	Indra Sen					
Boa	rd of Directors	1.00	0.	0.		0.
	Emily Ostruw Shaya					
	rd of Directors	1.00	0.	0.		0.
	Gilda Duplessis					
	rd of Directors	1.00	0.	0.		0.
		1.00	0.	0.		
	Lucia Hammer	1 00	_	_		0
воа	rd of Directors	1.00	0.	0.	·	0.
					_	

Form 99	00-EZ (2022)		Р	age 3
Part	V Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	22	Yes	
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	33		×
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		×
b c	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		×
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		×
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b		×
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		×
b 39 a b 40a	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b Section 501(c)(7) organizations. Enter: 39a Initiation fees and capital contributions included on line 9 39a Gross receipts, included on line 9, for public use of club facilities 39b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
b	section 4911:; section 4912:; section 4955: Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		×
c d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		×
41 42a		1)90	0-13	
b	Located at: <u>1715 Valence Street</u> , New Orleans LA ZIP + 4 <u>7011</u> 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)?	5 42b	Yes	
	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	420		×
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country:	42c		×
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year			
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a 44b		×
c d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d		×
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45a		×
		45b		X

Form 990-EZ (2022)			Р	age 4
			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition			
	to candidates for public office? If "Yes," complete Schedule C, Part I	46		×
Part	VI Section 501(c)(3) Organizations Only			

All section 501(c)(3) organizations must answer questions 47-49b and	152, and complete the tables for lines
50 and 51.	

	Check if the organization used Schedule O to respond to any question in this Part VI			
			Yes	No
47	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	47		×
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		×
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		×
b	If "Yes," was the related organization a section 527 organization?	49b		
		-		

Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key 50 employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	
None			

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None	-	
	-	
	-	
	_	
d Total number of other independent contractors each receiving	over \$100 000	

Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a

52 completed Schedule A . .

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

				01/31	/2023	
Sign	Signature of officer			Date		
Here	David C Schlakman, Vic					
	Type or print name and title					
Paid	Print/Type preparer's name	Preparer's signature	Date	C	heck 🗙 if	PTIN
Preparer	William F. Carothers		01/31/20	023 se	elf-employed	P01324818
Use Only						528114
	Firm's address 1051 Old Academ	ny Rd, Fairfield, CT 06824		Phone no. (203)767-6631		
May the IRS discuss this return with the preparer shown above? See instructions						

Additional Information From Form 990-EZ: Short Form Return of Organization Exempt from Income Tax

Form 990-EZ: Short Form Return of Organization Exempt from Income Tax	
Line 16: Other Expenses	Continuation Statement

Description	Amount
Bank fees	1.
Filing & registration fees	115.
Literacy Read bag materials	373.
Supplies	848.
Travel & entertainment	20.
Website	2,680.
Tot	al 4,037.

Form 990-EZ: Short Form Return of Organization Exempt from Income Tax Line 41

Continuation Statement

States where copy of return is filed						
СТ						
LA						

SCHEDULE A (Form 990)

(E)

Total

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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.

Name	of the	organizatio

2022
Open to Public Inspection

Name	of t	he organization					Employer identification	number
Earl	y	Learning Focus, Inc.					46-1500425	
Par	_		rity Status. (All	organizations mus	t comple	ete this p		ons.
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)								
1								
2								
3		A hospital or a cooperative hos		•	,	,	\/A\/;;;)	
		A medical research organization						(iii) Entor the
4		hospital's name, city, and state	•	njunction with a nosp	Jilai uesu			inj. Enter the
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in							
	_	section 170(b)(1)(A)(iv). (Com	-					
6 7		A federal, state, or local govern An organization that normally described in section 170(b)(1)	receives a subst	tantial part of its sup		• • •		the general public
8		A community trust described in			Part II)			
9		-			-	aratad in	apply potion with a k	and grant college
3		An agricultural research organi or university or a non-land-gra university:						
10		An organization that normally r receipts from activities related support from gross investment acquired by the organization a	to its exempt fur income and unr	nctions, subject to ce related business taxal	rtain exce ole incom	eptions; a le (less se	nd (2) no more than action 511 tax) from	33 ¹ /3% of its
11		An organization organized and		•		•	,	
12		An organization organized and	•	•				out the purposes of
		one or more publicly supported						
		the box on lines 12a through 12						
-								
а		Type I. A supporting organ						
		the supported organization supporting organization.					ne directors or trust	ees of the
b		Type II. A supporting organization(s). You must of the organization (s). You must of the organization (s).	the supporting o	rganization vested in	the same			
с		Type III functionally integ	-			onnectior	n with, and functiona	ally integrated with,
		its supported organization(s) (see instructio	ns). You must comp	ete Part	IV, Secti	ons A, D, and E.	
d		Type III non-functionally integration that is not functionally integration requirement (see instruction)	grated. The orgai	nization generally mus	st satisfy	a distribu	ition requirement an	
е		Check this box if the organ functionally integrated, or T						e II, Type III
f	Е	inter the number of supported of	organizations .					
g		Provide the following information	-					
		Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the o listed in you	rganization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					V	N.		
					Yes	No		
A)								
B)								
C)								
D)								

Part IISupport 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.)

Secti	Section A. Public Support							
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and		(1)	(0)0	(-,	(-,	(1) 1 0 10	
	membership fees received. (Do not							
	include any "unusual grants.")	12,072.	30,821.	27,782.	2,459.	1,093.	74,227.	
2	Tax revenues levied for the							
	organization's benefit and either paid to							
	or expended on its behalf	0.	0.	0.	0.	0.	0.	
3	The value of services or facilities							
	furnished by a governmental unit to the organization without charge		0				0	
		0.	0.	0.	0.	0.	0.	
4	Total. Add lines 1 through 3	12,072.	30,821.	27,782.	2,459.	1,093.	74,227.	
5	The portion of total contributions by							
	each person (other than a governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the amount							
	shown on line 11, column (f)						41,593.	
6	Public support. Subtract line 5 from line 4						32,634.	
Secti	on B. Total Support							
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
7	Amounts from line 4	12,072.	30,821.	27,782.	2,459.	1,093.	74,227.	
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties, and income from		_					
-		0.	0.	0.	0.	0.	0.	
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on	0.	0		0		0	
10	Other income. Do not include gain or	0.	0.	0.	0.	0.	0.	
10	loss from the sale of capital assets							
	(Explain in Part VI.)							
11	Total support. Add lines 7 through 10						74,227.	
12	Gross receipts from related activities, etc	. (see instruction	ons)			12	,	
13	First 5 years. If the Form 990 is for the					ear as a sectio	n 501(c)(3)	
	organization, check this box and stop he	re					🗌	
Secti	on C. Computation of Public Support	rt Percentag	e					
14	Public support percentage for 2022 (line	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		14	43.97%	
15	Public support percentage from 2021 Scl					15	39.82%	
16a	33 ¹ / ₃ % support test-2022. If the organ							
Ŀ	box and stop here . The organization qua	-		-				
b	33 ¹ / ₃ % support test-2021. If the organi this box and stop here. The organization							
17a	10%-facts-and-circumstances test-2	-		-				
	10% or more, and if the organization m	•						
	Part VI how the organization meets the							
	organization							
b	10%-facts-and-circumstances test-2	021. If the orga	anization did n	not check a bo	x on line 13, 1	6a, 16b, or 17	a, and line	
	15 is 10% or more, and if the organization							
	in Part VI how the organization meets the							
	organization							
18	Private foundation. If the organization							
	instructions						· · · 🗌	
						0 - 1 - 1 - 1 - 1	(Form 990) 2022	

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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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
•	organization without charge						
6 70	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 disgualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support		-				
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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						
~	Add lines 10a and 10b						
11	Net income from unrelated business						
••	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the						
	organization, check this box and stop he						
	on C. Computation of Public Suppor	-		10 1 (0)			
15	Public support percentage for 2022 (line 2					15	%
<u>16</u> Socti	Public support percentage from 2021 Sch on D. Computation of Investment In			<u></u>		16	%
<u>3ecu</u> 17	Investment income percentage for 2022 (-	v line 13 colu	imn (f))	17	%
18	Investment income percentage for 2022 (-		18	%
19a	33 ¹ / ₃ % support tests – 2022. If the organ					_	
	17 is not more than $33^{1/3}$ %, check this box						
b	33 ¹ / ₃ % support tests – 2021. If the organiz	-	-	-		-	
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box a	and see ins	tructions .

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.)

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

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

Section C. Type II Supporting Organizations

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).

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

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). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, 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.
- 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.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a

2b

3a

3b

Yes No

Yes No

1

2

1

Yes No

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	3-	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ				
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			
d	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			
		<u> </u>			

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

REV 01/24/23 PRO

Schedule A (Form 990) 2022

Schedu	le A (Form 990) 2022			Page 7				
Part	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Sect	ion D-Distributions			Current Year				
1	Amounts paid to supported organizations to accomplish of		1					
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	orted 2						
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations 3					
4	Amounts paid to acquire exempt-use assets		4					
5	Qualified set-aside amounts (prior IRS approval required-	–provide details in Part	<i>VI</i>) 5					
6	Other distributions (describe in Part VI). See instructions.		6					
	Total annual distributions. Add lines 1 through 6.		7					
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive 8					
9	Distributable amount for 2022 from Section C, line 6		9					
10	Line 8 amount divided by line 9 amount		10)				
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022				
1	Distributable amount for 2022 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required — <i>explain in Part VI</i>). See instructions.							
3	Excess distributions carryover, if any, to 2022							
a	From 2017							
b	From 2018							
C	From 2019							
d	From 2020							
e	From 2021							
f	Total of lines 3a through 3e							
<u>g</u>	Applied to underdistributions of prior years							
<u>h</u>	Applied to 2022 distributable amount							
;	Carryover from 2017 not applied (see instructions)							
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2022 from Section D, line 7: \$							
a	Applied to underdistributions of prior years							
b	Applied to 2022 distributable amount							
C	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.							
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.							
7	Excess distributions carryover to 2023. Add lines 3j and 4c.							
8	Breakdown of line 7:							
а	Excess from 2018							
b	Excess from 2019							
C	Excess from 2020							
d	Excess from 2021							
e	Excess from 2022							

REV 01/24/23 PRO

Schedule A (Form 990) 2022

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

SCHEDULE O			
(Form 990)	Form 990 or 990-EZ or to provide any additional information.		
Department of the Treasury Internal Revenue Service	Attach to Form 990 or Form 990-EZ. Go to <i>www.irs.gov/Form990</i> for the latest information.		Open to Public Inspection
Name of the organization	Go to www.irs.gov/rormsso for the fatest mormation.	Employer iden	tification number
Early Learning	Focus, Inc.	46-15004	
Pt I, Line 16:			
Description:	Bank fees \$1		
Description:	Filing & registration fees \$115		
Description:	Literacy Read bag materials \$373		
Description:	Supplies \$848		
Description:	Travel & entertainment \$20		
Description:	Website \$2,680		