Forms 990 / 990-EZ Return Summary For calendar year 2023, or tax year beginning , and ending 27-0523331 READING LEGACIES 234,478 Net Asset / Fund Balance at Beginning of Year Revenue 412,706 Contributions Program service revenue 968 Investment income 494 Capital gain / loss Fundraising / Gaming: Gross revenue Direct expenses Net income Other income 0 414,168 Total revenue **Expenses** 370,260 Program services Management and general 57,388 Fundraising 427,648 Total expenses -13,480 Excess / (deficit) Changes Net Asset / Fund Balance at End of Year 220,998 Reconciliation of Revenue Reconciliation of Expenses Total revenue per financial statements Total expenses per financial statements_ Less: Less: Unrealized gains Donated services Donated services Prior year adjustments Recoveries Losses Other Other Plus: Plus: Investment expenses Investment expenses Other Other 414,168 427,648 Total expenses per return Total revenue per return **Balance Sheet** Beginning Ending Differences **243**,708 243,204 Assets 9,230 22,206 Liabilities 220,998 -13,480 Net assets Miscellaneous Information Amended return $05/15/2\overline{4}$ Return / extended due date Failure to file penalty

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2023, or fiscal year beginning .

Department of the Treasury

Do not send to t

..., 2023, and ending .

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

2023

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Internal Revenue Service Name of file FIN or SSN 27-0523331 READING LEGACIES Name and title of officer or person subject to tax **BETTY MOHLENBROCK** PRESIDENT & CEO Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b 2a Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9) _____ 2b b Total tax (Form 1120-POL, line 22)
b Tax based on investment income (Form 990-PF, Part V, line 5) 3a Form 1120-POL check here 3b 4a Form 990-PF check here 4b b Balance due (Form 8868, line 3c)
b Total tax (Form 990-T, Part III, line 4)
b Total tax (Form 4720, Part III, line 1)
b FMV of assets at end of tax year (Form 5227, Item D) 5a Form 8868 check here 5b 6a Form 990-T check here 6b 7a Form 4720 check here 7b 8a Form 5227 check here 8b b Tax due (Form 5330, Part II, line 19) 9b
b Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10b 9a Form 5330 check here 10a Form 8038-CP check here ... Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that X I am an officer of the above entity or I am a person subject to tax with respect to (name , (EIN) and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X I authorize HAMILTON THARP LLP _ to enter my PIN **85141** as my signature ERO firm name Enter five numbers, but on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Signature of officer or person subject to tax _ Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification 30075892803 number (EFIN) followed by your five-digit self-selected PIN. I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. ERO's signature _ Date

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2023 Open to Public Inspection

Form **990** (2023)

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. For the 2023 calendar year, or tax year beginning and ending D Employer identification number C Name of organization **B** Check if applicable: READING LEGACIES Address change 27-0523331 Doing business as Name change 2750 HISTORIC DECATUR ROAD #210 619-269-2743 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/ terminated SAN DIEGO CA 92106 414,168 Amended return Name and address of principal officer: H(a) Is this a group return for subordinates? Yes X No Application pending BETTY MOHLENBROCK ___ Yes | No 816 C AVENUE H(b) Are all subordinates included? If "No," attach a list. See instructions CORONADO 92118 **X** 501(c)(3) Tax-exempt stat 501(c) (4947(a)(1) or Website: WWW.READINGLEGACIES.ORG H(c) Group exemption num Form of organization: X Corporation Trust Association Other Year of formation: 2010 M State of legal domicile: Part I Summarv 1 Briefly describe the organization's mission or most significant activities: TO FACILITATE SUPPORTIVE RELATIONSHIPS FOR CHILDREN THROUGH FAMILY AND Governance FRIENDS READING ALOUD WITH THEM. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 12 4 Number of independent voting members of the governing body (Part VI, line 1b) 11 4 Activities 9 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) 131 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0 7b Prior Year Current Year 406,284 412,706 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -5,196 1,462 15,000 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 416,088 414,168 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 280,157 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 340,763 **16a** Professional fundraising fees (Part IX, column (A), line 11e) 0 **b** Total fundraising expenses (Part IX, column (D), line 25) 86,885 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 93,368 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <u>373,525</u> <u>427,648</u> 42,563 Beginning of Current Year -<u>13,480</u> 19 Revenue less expenses. Subtract line 18 from line 12 nd of Year 243,204243,708 20 Total assets (Part X. line 16) 22,206 21 Total liabilities (Part X, line 26) 9,230 ESE ESE 22 Net assets or fund balances. Subtract line 21 from line 20 234,478 220,998 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Here BETTY MOHLENBROCK PRESIDENT & CEO Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check Paid 05/01/24 LEANNA ALMKLOV, CPA self-employed P01692803 **Preparer** HAMILTON THARP LLP 27-1509117 Firm's name Firm's EIN **Use Only** 323 N HIGHWAY 101 SOLANA BEACH, CA 858-481-7702 Firm's address May the IRS discuss this return with the preparer shown above? See instructions X Yes No

Form 990 (2023) READING LEGACIES	27-0523331	Page 2
Part III Statement of Program Service Accomplishment Check if Schedule O contains a response or note to	its	
1 Briefly describe the organization's mission:	•	
TO EMPOWER CHILDREN AS VALUED FAMILY INTERGENERATIONAL SHARED-READING EXP		THROUGH
2 Did the organization undertake any significant program services during the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	e year which were not listed on the	Yes X No
Did the organization cease conducting, or make significant changes in horservices? If "Yes," describe these changes on Schedule O.	w it conducts, any program	Yes X No
4 Describe the organization's program service accomplishments for each of expenses. Section 501(c)(3) and 501(c)(4) organizations are required to ruthe total expenses, and revenue, if any, for each program service reported	eport the amount of grants and allocations to ot	-
4a (Code:) (Expenses \$ 84,532 including gran GRANDPARENT STORYBOOKS - ENHANCES IN BY SHARING MEMORIES AND FAMILY VALUES THIS PROGRAM IS TO PROVIDE MEANINGFUL THEY READ ALOUD TOGETHER, USING TECHN SEPARATIONS AND TO ENHANCE FAMILIAL RECORDED ON VIDEO READING A FAVORITE GRANDCHILDREN AND OTHER LOVED ONES. TEAMILY TO BE ENJOYED AND CHERISHED TO	TERGENERATIONAL FAMILY THROUGH STORYBOOKS. THE COMMUNICATION BETWEEN NOLOGY TO BRIDGE GEOGRA- INTERACTIONS. SENIORS AND BOOK TO THEIR GRANDCHILL THE RECORDING AND BOOK A	RELATIONSHIPS HE PURPOSE OF GENERATIONS AS PHICAL RE COACHED AND LDREN, GREAT
4b (Code:) (Expenses \$ 94,220 including gran YOUTH READERS - IMPACT HIGH SCHOOL AND THROUGH SEMESTER-LONG COMMITMENT OF FINITHEIR OWN COMMUNITIES, ESPECIALLY VOLUNTEERS PARTNER WITH THE YOUTH PAIR GUIDANCE, AND ENCOURAGEMENT. AT THE OPPORTUNITY TO MAKE A PRESENTATION TO YOUNG CHILDREN ABOUT THEIR EXPERIENCE CONGRATULATE THE YOUTH FOR THEIR COMMITTED.	ND MIDDLE SCHOOL AGED YOU READING ALOUD WEEKLY TO UNDER-SERVED COMMUNITIES TO PROVIDE TO THE SEMESTER, TO THEIR PARENTS AND THE FOLLOWED BY A SPECIAL	OUTH YOUNG CHILDREN ES. ADULT RAINING, HE YOUTH HAVE AN PARENTS OF THE
·		
4c (Code:) (Expenses \$ 151,284 including gran BOOKS BRIDGES - HELPS CHILDREN TRANSOTHEIR INCARCERATED LOVED ONES. PARENT CHILDREN ON VIDEO, FORMING HEALTHY AN IMPORTANCE OF READING ALOUD WITH CHITIPS AND TOOLS TO MAKE THE SHARED REATHE CHILD. AFTER THE INCARCERATED PARENTS AND STORY BOOK ARE SENT TO THE CONTRACT OF THE CHILD.	CEND THE BARS THAT SEPAI S ARE TRAINED TO READ A NO LASTING BONDS AND LEAD LDREN. VOLUNTEER FACILI'S ADING EXPERIENCE FUN AND RENTS READ ALOUD ON VIDE	RATE THEM FROM ALOUD TO THEIR ARNING ABOUT THE IATORS OFFER D VALUABLE TO EO, THE VIDEO
AGAIN.		
4d Other program services (Describe on Schedule O.)		,
(Expenses \$ 40,224 including grants of \$) (Revenue \$)
4e Total program service expenses 370,260		

4e Total program service expenses Form **990** (2023)

Г	III IV Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			140
2	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	. 1	X	
2			Λ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	. 3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
В	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
)	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
)	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D. Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	• • • • • • • • • • • • • • • • • • • •		
•	of its total assets reported in Port V. line 162 /f "Vos." complete Schodule D. Port VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	. 110		- 22
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11a		X
5 F		. 116		Λ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f		Х
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	. 111		Λ
a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	420		v
	Schedule D, Parts XI and XII	. 12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	401		37
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
a	Did the organization maintain an office, employees, or agents outside of the United States?	. 14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			.,
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	. 14b		X
	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
;	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	. 16		X
•	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	. 17		X
,	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
1	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		X
а	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<u></u>		_
_				
)a b	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			

Form	990 (2023) READING LEGACIES 27-0523331		Р	age 4
	art IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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			l
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	04.		
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	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	245		
٨	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		—
d 250		240		
2 5a	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	25a		
b	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		х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
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 Schedule N, Part II	32		X
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
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
35a	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			
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	00	v	
Da	19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		V	L L
1.	Enter the number reported in box 3 of Form 1006 Enter, 0, if not emplicable		Yes	No
1a h	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and			
С	reportable gaming (gambling) winnings to prize winners?	1c		х
DAA	repersions gaining (gainemig) minings to prize ministre.		aar	(2023)

orm	990 (2023) READING LEGACIES 27-0523331		Pa	age 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Х
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes" enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
		7a		х
b	and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities			1
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

Form 990 (2023) **READING LEGACIES** 27-0523331 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 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 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? X X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a 8b X **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe on Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO. Executive Director, or top management official 15a **b** Other officers or key employees of the organization X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,

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

and financial statements available to the public during the tax year.

BETTY MOHLENBROCK