990 **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service 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/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the	2022 calend	dar year, or tax year beginning	01/01/2022 ar	nd ending		12/31/	2022				
В	Check if	applicable:	C Name of organization Police Ad	ctivities League of Southwest \	Vashingto	n		D Emplo	oyer identification	number		
	Address	change	Doing business as						91-2072283			
	Name ch	nange	Number and street (or P.O. box if	mail is not delivered to street addres	s)	Room	/suite	E Teleph	none number			
	Initial ret	turn	605 E Evergreen Blvd						360-487-7487			
	Final retu	urn/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal code)							
	Amende	d return	Vancouver, WA 98661					G Gross	receipts \$	127,567		
	Applicat	ion pending	F Name and address of principal off	icer: Brian Stone			H(a) Is this a gr	oup return fo	or subordinates? 🔲 Y	es 🔽 No		
			605 E Evergreen Blvd, Vancou	uver, WA 98661			H(b) Are all s	ubordinat	es included? 🗌 Ye	es 🗌 No		
ı	Tax-exe	mpt status:	✓ 501(c)(3) 501(c) () (insert no.)	or 527		If "No," attac	h a list. Se	ee instructions.			
J	Website	: PALofSW	VWA.org				H(c) Group e	xemption	number			
K	Form of o	organization: 🗸	Corporation Trust Associa	tion Other L	Year of for	mation:	2001	M State	of legal domicile:	WA		
P	art I	Summa	ry									
	1	Briefly des	cribe the organization's miss	ion or most significant activit	ies: To pr	romot	e positive r	elations	hips between po	olice		
e				ased education programs and i								
Activities & Governance												
er	2	Check this	box if the organization d	iscontinued its operations or	disposed	of m	ore than 25	5% of it	s net assets.			
õ	3	Number of	voting members of the gove	rning body (Part VI, line 1a).				3		13		
<u>«</u>	4		=	s of the governing body (Part				4		13		
ies	5			n calendar year 2022 (Part V,				5		11		
Ĭ	6			necessary)	,			6		282		
Aci	7a		ated business revenue from I	= :				7a		0		
	b			from Form 990-T, Part I, line				7b		0		
		•					Prior Yea	r	Current Ye	ar		
an.	8	Contributio	348,932		130,308							
Revenue	9		ervice revenue (Part VIII, line	-				2,544		3,140		
eve	10	_), lines 3, 4, and 7d)				6,394		-5,881		
ď	11	Other reve	0		0							
	12			nust equal Part VIII, column (A			3	857,870		127,567		
_	13	-		X, column (A), lines 1-3)				0		0		
	14			(, column (A), line 4)				0		0		
S	4-			benefits (Part IX, column (A), lir			-	63,654		195,482		
Expenses	16a			olumn (A), line 11e)				0		0		
þer	b		raising expenses (Part IX, col	* **	24,410							
Ж	17		enses (Part IX, column (A), line				-	20,772		113,654		
	18	•		equal Part IX, column (A), line				284,426		309,136		
	19	-	-	8 from line 12	-			73,444		-181,569		
- S				<u> </u>		Beg	inning of Curr		End of Ye			
ets (20	Total asset	ts (Part X, line 16)					82,878		601,293		
Ass Ba	21		" (D L)(" 00)					216		200		
Net Assets or Fund Balances	22		or fund balances. Subtract li				-	82,662		601,093		
_	art II		re Block					02/002		00.7070		
		lties of perjury	, I declare that I have examined this i	return, including accompanying sche officer) is based on all information of					my knowledge and	belief, it is		
_		1		,								
Sig	an	Signature of o	officer				L Date					
	ere	"					Date					
П	ei e		e, President									
_		1 7 .	name and title	Proparor's signature	1	Data			DTINI			
Pa	nid		preparer's name	Preparer's signature		Date		Check self-emp	if PTIN	0470		
Pr	epare	r Sandi Gl					1		P0187	0179		
	e Onl	y Firm's nan		WA OCCCC		Firm's EIN						
		Firm's add					Phon	e no.	360-693-09			
IVIA	іу іпе ін	ao discuss 1	ious reioro wiio the preparer s	shown above? See instruction	IS				IVIYAS	No		

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Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	To promote positive relationships between police officers and youth through community based education programs and
	recreational opportunities. 4,563 youth served.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 59,925 including grants of \$ 0) (Revenue \$ 3,140)
-14	PAL provides low/no cost summer programs to elementary, middle and high school students. Programs include science-based
	camps and forensic science/investigative programs for older youth. Programs are taught in collaboration with local law
	enforcement volunteers. Summer camps vary in duration and engage over 296 youth and teens in 2022.
4b	(Code:) (Expenses \$
	PAL provides sports tournaments for local elementary students in the winter and spring and summer sports camps in the fall.
	Tournament programs engaged 1745 youth and allow school-based teams to compete at no cost, emphasizing cooperation, team
	play and sportsmanship. Law enforcement officers have previously participated as coaches and referees. Summer sports camps
	are directly facilitated by law enforcement partners and are offered at low cost allowing students multiple days of skill development.
	1926 youth served.
4c	(Code:) (Expenses \$ 37,074 including grants of \$ 0) (Revenue \$ 0)
70	PAL Literacy events provide a one-time positive interaction for law enforcement and youth focused on elementary aged students.
	Officers visit with students at the school, share safety information, read a story and provide a book to each child at the event. PAL
	held 32 events in 2022 and gave over 3,000 new books to kids. 3,000 youth served.
	Thomas of ordina in 2022 and gave over aloos now books to kidd. Office your solve.
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 1
	(Expenses \$ 102,465 including grants of \$ 0) (Revenue \$ 0)
46	Total program service expenses 220 178

orm 99	00 (2022)		F	Page
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1	~	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	'	
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		/
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 "Yes," complete Schedule C, Part II</i>	4		-
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," complete Schedule D, Part II	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		_
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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		,
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	_	
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		-
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 Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX </i>	11d		~
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i>	11e		\ \
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		_
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		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		~
D	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		_
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		,
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		,
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		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		
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		
20a	Did the organization operate one or more hospital facilities? If "Ves " complete Schedule H	20a		•

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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

20b

Part I	V 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		_
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		,
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	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			ĺ
_	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
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			
06	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		~
26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		,
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			ĺ
	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		~
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		_
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		1
	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		_
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			Ť
	conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		_
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		~
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		~
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
26	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? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	_	
Part '	· · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	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	-		
С	reportable gaming (gambling) with backup withholding rules for reportable payments to vendors and	10		

Part	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 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
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		~
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		/
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	\ \ \	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b	~	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7-		
L	·	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
C	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	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		1
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		1
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: Gross income from members or shareholders			
a 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 12b	1=0		
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	-		
C	Enter the amount of reserves on hand	4.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		-
b 15	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> . Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	14b		
13	excess parachute payment(s) during the year?	15		~
	If "Yes," see the instructions and file Form 4720, Schedule N.	10		•
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.	.5		
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.			

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Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 13 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 13 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **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 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. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b 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 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website ✓ Upon request Other (explain on Schedule O) Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Plus and Minus LLC, (360)921-7915

Part VI

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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.

<u> </u>								, , , , , , , , , , , , , , , , , , , ,		
					C)					
(A)	(B)	(do n	ot oh		ition	e than c	nno	(D)	(E)	(F)
Name and title	Average					is both		Reportable	Reportable	Estimated amount
	hours per week		_	_	lirect	or/trust		compensation from the	compensation from related	of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
Anna Lookingbill	40.00									
Executive Director	0.00				~	~		38,958	0	0
Jenny Thompson	40.00									
Executive Director	0.00				~			35,379	0	0
Brett Blechschmidt	1.00									
Board Member	0.00	~	~					0	0	0
A D Simmons	1.00									
Board Member	0.00	~						0	0	0
Brian Stone	2.00									
President	0.00	~		~				0	0	0
Jeff Olson	2.00									
Board Member	0.00	~		~				0	0	0
Phillip Sample	1.00									
Board Member	0.00	~						0	0	0
Jeff Tennant	2.00									
Vice President	0.00	~		~				0	0	0
Bill Oman	1.00									
Past President	0.00	~						0	0	0
Doug Luse	1.00									
Board Member	0.00	~						0	0	0
Pat Jollota	1.00									
Board Member	0.00	~						0	0	0
Brian Potter	2.00									
Past President	0.00	~						0	0	0
Pat Janik	2.00									
Secretary	0.00	~		~				0	0	0
Craig Birnbach	1.00									
Board Member	0.00	'						0	0	0

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Ξmį	ploy	yee	s, an	d F	lighest Compe	nsated Emplo	yees (c	ontinued)
					((C)						
	(A) Name and title	(B) Average hours per week	box,	unles	neck ss pe d a d	rson	e than is both or/trus	n an	(D) Reportable compensation from the	(E) Reportable compensation from related	Estimate of	(F) ed amount other ensation
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	froi organiz	n the ation and ganizations
John	Fazzolari	1.00										
	Member	0.00	-						0	0		0
	Doriot Member	1.00	_						0	0		0
	Glandon	2.00										
Board	Member		~						0	0		0
			-									
1b	Subtotal		٠						74,337	0		0
C	Total from continuation sheets to Part		n A		•				74.007			
d 2	Total (add lines 1b and 1c)	but not	limite	d t	:o t	hos	e lis	ted	•	eceived more t	 han \$10	00,000 of
	reportable compensation from the organi	Zation							0			Yes No
3	Did the organization list any former of	officer, dire	ector,	tru	ste	e, k	кеу е	mpl	loyee, or highes	st compensated		100 110
	employee on line 1a? If "Yes," complete 3										3	·
4	For any individual listed on line 1a, is the organization and related organizations											
5	individual	r accrue co	 ompe	nsat	tion	fro	. . m anv	 n		tion or individual	4	· ·
•	for services rendered to the organization										5	~
Secti	Section B. Independent Contractors									•		
1	Complete this table for your five high compensation from the organization. Repo											
	(A) Name and business add	ress							(B) Description of serv	vices	(C) Compensa	tion
None												
2	Total number of independent contractor received more than \$100,000 of compens						ed to	o th	ose listed abov 0	e) who		

	*	
Part VIII	Statement of Revenue	

		Check if Schedule	Осо	ntains a re	spon	se or note to ar	ny line in this Pa	ırt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ú, w	1a	Federated campaign	ne		1a	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b	0				
ž g		•								
S,C	C .	Fundraising events			1c	0				
a ii	d	Related organization			1d	0				
ດັ 🖺 🏻	е	Government grants			1e	0				
Sir	f	All other contribution								
er e		and similar amounts no	ot inclu	uded above	1f	130,308				
ᅙ	g	Noncash contribution	ons in	cluded in						
들의		lines 1a-1f			1g	\$ 10,800				
a S	h	Total. Add lines 1a-				Ψ 10,000	130,308			
<u> </u>		Total. Add lines 1a	-11 .		•	Dusiness Code	130,306			
a	_					Business Code				
ě	2a									
F e	b									
yram Ser Revenue	С									
an e	d									
۾ ۾	е									
Program Service Revenue	f	All other program se					3,140	3,140	0	0
-	g	Total. Add lines 2a-					3,140	3,140	J	
	3	Investment income					3,140			
		other similar amoun	•	•			E 004	F 004		
	_						-5,881	-5,881	0	0
	4	Income from investr	nent o	of tax-exem	ipt bo	nd proceeds	0	0	0	0
	5	Royalties					0	0	0	0
				(i) Rea		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)			0	0				
	d	Net rental income o		e)						
		Gross amount from	1 (103)	(i) Securit		(ii) Other				
	7a			(i) occurr	.100	(ii) Otrici				
		sales of assets	_							
	_	other than inventory	7a							
e l	b	Less: cost or other basis								
Revenue		and sales expenses .	7b							
ě	С	Gain or (loss)	7c		0	0				
	d	Net gain or (loss)								
Other		Gross income from	m fu	ndraising						
ŏ	-	events (not including		0						
		of contributions rep		d on line						
		1c). See Part IV, line			8a					
	L.	· ·								
		Less: direct expens			8b					
	C	Net income or (loss)			g eve	nts				
	9a	Gross income f								
		activities. See Part I	IV, lin	e 19 .	9a					
	b	Less: direct expens	es .		9b					
	С	Net income or (loss)) from	gaming a	ctivitie	es				
		Gross sales of ir								
		returns and allowan			10a					
	b	Less: cost of goods			10b					
	C	Net income or (loss)				l				
	U	INET ILLOUTIE OF (IOSS)	, 11011	i saits Ui II	iv e iil(T .				
n						Business Code				
e e	11a									
en la	b									
scellaneo Revenue	С									
Miscellaneous Revenue	d	All other revenue								
≥	е	Total. Add lines 11a	a–11d	1			0			
	12	Total revenue. See					127,567	-2,741	0	0

Form 990 (2022) Page **10**

Part IX Statement of Functional Expenses

Section 501(c)(3) a	and 501	1(c)(4)	organi	zations	must cor	mplete a	ıll colu	ımns.	All o	ther o	orga	nizati	ons mu	ıst comp	olete co	olumn	(A).	
	~			_		•						_	. 13.7						

Secuc	on 501(c)(3) and 501(c)(4) organizations must complement Check if Schedule O contains a response				
Do no	ot include amounts reported on lines 6b, 7b,	(A)		(C)	(D)
	o, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		охроново	general expenses	схропосо
	and domestic governments. See Part IV, line 21 .	0	0		
2	Grants and other assistance to domestic	-	-		
	individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
•	trustees, and key employees	75,000	23,391	40,370	11,239
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	05.044	00.750		500
7	· · · · · · · · · · · · · · · · · · ·	95,014	93,759	657	598
7 8	Other salaries and wages Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	3,394	2,246	900	248
9	Other employee benefits	6,415	4,245	1,701	469
10	Payroll taxes	15,659	10,362	4,151	1,146
11	Fees for services (nonemployees):	.5,507	.5,562	.,	.,.10
а	Management	1,603	1,086	405	112
b	Legal				
С	Accounting	5,257	3,478	1,394	385
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.) .				
12	Advertising and promotion	8,155	7,339	652	164
13	Office expenses	4,402	3,982	210	210
14 15	Information technology				
16	Royalties	10,800	9,720	540	E40
17	Travel	3,460	3,114	173	540 173
18	Payments of travel or entertainment expenses	3,400	3,114	173	173
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	5,757	2,884	2,873	
20	Interest	271.01	2/001		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	3,386	2,709	339	338
23	Insurance	8,223	7,400	576	247
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a	Recruiting Expenses	12,137	10,923	607	607
b	Fundraising Expense	7,022	100	0	7,022
c d	Credit Card Fees Program Supplies	1,012 42,440	100 42,440	0	912
e	All other expenses	42,440	42,440	0	
25	Total functional expenses. Add lines 1 through 24e	309,136	229,178	55,548	24,410
26	Joint costs. Complete this line only if the	307,130	227,110	33,340	21,710
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here \square if				
	following SOP 98-2 (ASC 958-720)				
	<u> </u>				Form 990 (2022)

Part X Balance Sheet

		Check if Schedule O contains a response or	note	to any line in this Par	tX		🗌				
					(A) Beginning of year		(B) End of year				
	1	Cash—non-interest-bearing			88,765	1	20,591				
	2	Savings and temporary cash investments			679,569	2	569,524				
	3	Pledges and grants receivable, net			•	3					
	4	Accounts receivable, net		-		4	20				
	5	Loans and other receivables from any current of trustee, key employee, creator or founder, substantially antique of the controlled antique of the co	antial	contributor, or 35%							
	•	controlled entity or family member of any of thes				5					
	6	Loans and other receivables from other disqua under section 4958(f)(1)), and persons described		` `		6					
ts	7	Notes and loans receivable, net				7					
Assets	8	Inventories for sale or use				8					
ä	9	Prepaid expenses and deferred charges				9					
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		18,209							
	b	Less: accumulated depreciation	10b	7,051	14,544	10c	11,158				
	11	Investments – publicly traded securities				11					
	12	Investments - other securities. See Part IV, line 1	11 .			12					
	13	Investments-program-related. See Part IV, line	11 .			13					
	14	Intangible assets		[14					
	15	Other assets. See Part IV, line 11		[15					
	16	Total assets. Add lines 1 through 15 (must equa	al line	33)	782,878	16	601,293				
	17	Accounts payable and accrued expenses			216	17	200				
	18	Grants payable			0	18					
	19	Deferred revenue		[0	19					
	20	Tax-exempt bond liabilities			0	20					
	21	Escrow or custodial account liability. Complete I			0	21					
Liabilities	22		ans and other payables to any current or former officer, director, stee, key employee, creator or founder, substantial contributor, or 35%								
į		controlled entity or family member of any of thes	se per	sons	0	22					
Ë	23	Secured mortgages and notes payable to unrela	ted th	ird parties	0	23					
	24	Unsecured notes and loans payable to unrelated	third	parties	0	24					
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines	17–2	4). Complete Part X							
		of Schedule D				25					
	26	Total liabilities. Add lines 17 through 25			216	26	200				
seou		Organizations that follow FASB ASC 958, che and complete lines 27, 28, 32, and 33.									
<u>la</u>	27	Net assets without donor restrictions			775,620	27	596,343				
Ba	28				7,042		4,750				
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 9 and complete lines 29 through 33.									
ō	29	Capital stock or trust principal, or current funds				29					
ets	30	Paid-in or capital surplus, or land, building, or ed		-		30					
SS	31	Retained earnings, endowment, accumulated inc				31					
Ϋ́	32	Total net assets or fund balances		<u> </u>	782,662		601,093				
Š	33	Total liabilities and net assets/fund balances .			782,878		601,293				

Form 990 (2022) Page **12**

Part :						
	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			127	7,567
2	Total expenses (must equal Part IX, column (A), line 25)	2			309	9,136
3	Revenue less expenses. Subtract line 2 from line 1	3			-181	1,569
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			782	2,662
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
	Prior period adjustments	8				
	Other changes in net assets or fund balances (explain on Schedule O)	9				
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		ĺ			
	32, column (B))	10			601	1,093
Part 2	KII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_	Ш,	Yes	No
	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other If the organization changed its method of accounting from a prior year or checked "Other," expression of the content of the c	nlain	<u></u>			
	Schedule O.	φιαιιι	OII			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were cor					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
	Were the organization's financial statements audited by an independent accountant?		. 2	2b		~
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a			
	separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over			\Box		
	the audit, review, or compilation of its financial statements and selection of an independent account	ınt?	. 2	2c		
	If the organization changed either its oversight process or selection process during the tax year, e. Schedule O.	kplain	on			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in	the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. :	3a		~
	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits	. 3	3b	200	

Form **990** (2022)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

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.

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Police Activities League of Southwest Washington 91-2072283 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12a, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (iii) Type of organization (vi) Amount of (i) Name of supported organization (ii) EIN (iv) Is the organization (v) Amount of monetary (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 **(e)** 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 411,208 431,419 357,995 328,218 116,768 1,645,608 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities 3 furnished by a governmental unit to the organization without charge 11,700 10,800 14,400 10,800 47,700 **Total.** Add lines 1 through 3 . . . 4 411,208 443,119 368,795 342,618 127,568 1,693,308 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) **Public support.** Subtract line 5 from line 4 1,693,308 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 411,208 Amounts from line 4 368,795 443,119 342.618 127,568 1,693,308 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) **Total support.** Add lines 7 through 10 11 1,693,308 Gross receipts from related activities, etc. (see instructions) 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 100 % 14 Public support percentage from 2021 Schedule A, Part II, line 14 15 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this ~ 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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Schedule A (Form 990) 2022 Page **3**

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	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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support		1	I	1		
	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						
С	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	-			-		
0 1:	organization, check this box and stop he						
	on C. Computation of Public Suppor			10 1 (f)		45	0/
15 16	Public support percentage for 2022 (line a Public support percentage from 2021 Scl		-				<u>%</u> %
16 Secti	on D. Computation of Investment In					16	70
17	Investment income percentage for 2022 (ov line 13 colu	ımn (f\)	17	%
18	Investment income percentage for 2022 (-			
19a	33 ¹ / ₃ % support tests—2022. If the organ						
·Ju	17 is not more than 331/3%, check this box						
b	331/3% support tests—2021. If the organiz		-	-		-	_
~	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	_	_	•	· · · · · · · · · · · · · · · · · · ·		

Schedule A (Form 990) 2022 Page 4

Supporting Organizations Part IV

(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.)

Se

Jeen	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	103	NO
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	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.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
7	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	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 .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
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.)

10b

Schedule A (Form 990) 2022 Page 5 Part IV **Supporting Organizations** (continued) Yes No 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 detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No 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 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 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). 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.* 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. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b 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. 3a

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

3b

Schedule A (Form 990) 2022

	Tune III New Functionally Integrated 500(a)(2) Supporting Ora		-ations	rage C
Part				
1	Check here if the organization satisfied the Integral Part Test as a qualifying			
Sect	instructions. All other Type III non-functionally integrated supporting organion A—Adjusted Net Income	IIZal	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		(Optional)
_ <u>.</u>	Recoveries of prior-year distributions	2		
_ _ _	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
<u>.</u>	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		
7	Check here if the current year is the organization's first as a non-functional (see instructions)	ally i	ntegrated Type III suppor	rting organization

Schedule A (Form 990) 2022 Page 7

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

Schedule A (Form 990) 2022 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI 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 D (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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name o	f the organization		Employer identification number
Police	Activities League of Southwest Washington		91-2072283
Par		sed Funds or Other Similar Fund	ls or Accounts.
	Complete if the organization answered "		1000
	Complete if the organization answered	1	(b) Funda and other accounts
	T	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a		ld in donor advised
	funds are the organization's property, subject to the	<u> </u>	
6	Did the organization inform all grantees, donors, ar		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		
			· · · · · · L Yes L No
Par	Conservation Easements.		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o	organization (check all that apply).	
	Preservation of land for public use (for example, recreation)		f a historically important land area
	Protection of natural habitat	· ·	f a certified historic structure
	Preservation of open space	i reservation of	a continea mistorio stractare
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	in the form of a conservation
_	easement on the last day of the tax year.	d a quaimed conservation contribution	
			Held at the End of the Tax Year
а	Total number of conservation easements		. 2 a
b	Total acreage restricted by conservation easements		. 2b
С	Number of conservation easements on a certified hi		
d	Number of conservation easements included in (c) a	acquired after July 25, 2006, and not c	on a
	historic structure listed in the National Register .		· 2d
3	Number of conservation easements modified, trans	ferred, released, extinguished, or term	
•	tax year		a.ca 2) inc organization dailing inc
4	Number of states where property subject to conserv	vation easement is located	
5	Does the organization have a written policy region		ection handling of
•	violations, and enforcement of the conservation eas		
_			
6	Staff and volunteer hours devoted to monitoring, inspec	ting, nandling of violations, and enforcing	conservation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing o	conservation easements during the year
8	Does each conservation easement reported on line 2		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization report		
	balance sheet, and include, if applicable, the text of	of the footnote to the organization's fir	nancial statements that describes the
	organization's accounting for conservation easemer	nts.	
Parl	III Organizations Maintaining Collections	of Art. Historical Treasures, or 0	Other Similar Assets.
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FAS		e statement and halance sheet works
ıu	of art, historical treasures, or other similar assets	•	
	service, provide in Part XIII the text of the footnote to		· · · · · · · · · · · · · · · · · · ·
	•		
b	If the organization elected, as permitted under FAS	•	
	art, historical treasures, or other similar assets held		earch in furtherance of public service,
	provide the following amounts relating to these item		
	(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,		
_	following amounts required to be reported under FA		accord for infancial gain, provide the
	-	_	•
а	Revenue included on Form 990, Part VIII, line 1 .		
b	Assets included in Form 990, Part X		\$

Schedu	le D (Form 990) 2022					Page 2
Part	•					
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and ot	her reco	rds, check any of th	ne following that make	e significant use of its
а	☐ Public exhibition		d	Loan or exchang	ge program	
b	☐ Scholarly research		е	☐ Other		
С	☐ Preservation for future generations					
4	Provide a description of the organizat XIII.	ion's collections a	and expla	ain how they further	the organization's ex	empt purpose in Par
5	During the year, did the organization assets to be sold to raise funds rather					
Part						
	Complete if the organization 990, Part X, line 21.				•	
1a	Is the organization an agent, trustee,					not
	included on Form 990, Part X?					· Yes No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	ollowing table:		
						Amount
C	Beginning balance				1c	
d	Additions during the year				1d	
e	3 . ,				1e	
f	Ending balance				If	#.0 D V D N-
2a	Did the organization include an amour If "Yes," explain the arrangement in Pa					·
	Endowment Funds.	art Alli. Check her		xpiariation has been	provided on Part Alli	<u> 🗀 </u>
ı aı	Complete if the organization	answered "Yes	" on For	m 990 Part IV lin	e 10	
	Complete ii the organization	(a) Current year		or year (c) Two yea		ack (e) Four years back
1a	Beginning of year balance	(4, 44, 44, 44, 44, 44, 44, 44, 44, 44,	(-,	(2)	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(1)
b	Contributions					
C	Net investment earnings, gains, and					
	losses					
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the	ne current year er	nd balanc	e (line 1g, column (a	a)) held as:	
а	Board designated or quasi-endowmer	nt	%			
b	Permanent endowment	%				
С	Term endowment%					
_	The percentages on lines 2a, 2b, and 2					
3a	Are there endowment funds not in the organization by:	possession of the	ne organı	zation that are held	and administered for	
						Yes No
	(i) Unrelated organizations					. 3a(i)
h	(ii) Related organizations	· · · · ·	 Loo roqui			. 3a(ii)
4	Describe in Part XIII the intended uses	•	•			. 30
- Part			JII S EIIUC	owinient lunus.		
art	Complete if the organization		" on For	m 990 Part IV lin	e 11a See Form 99	0 Part X line 10
	Description of property	(a) Cost or ot		(b) Cost or other basis	(c) Accumulated	(d) Book value
	2636/iption of property	(investm		(other)	depreciation	(a) Dook value
1a	Land		0	0		0
b	Buildings		0		0	0
c	Leasehold improvements		18,209		7,051	11,158
- ب	Faultment		. 0,207	-	7,001	11,100

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

0

e Other

0

0

Part VII	Investments—Other Securities.	V line 11h Coo E		David V. Lines 10
	Complete if the organization answered "Yes" on Form 990, Part I (a) Description of security or category	(b) Book value		ethod of valuation:
	(including name of security)	(b) Book value		nd-of-year market value
(1) Financial				
	eld equity interests			
(3) Other				
(B)				
(D)				
(F)				
(G) (H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.) . .			
Part VIII	Investments—Program Related.			
T dire VIII	Complete if the organization answered "Yes" on Form 990, Part I	V line 11c See Fo	orm 990	Part X line 13
	(a) Description of investment	(b) Book value		ethod of valuation:
	(a) Becomption of investment	(b) Book value		nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.	V P - 44 I O - E	000	D. IV. P 45
	Complete if the organization answered "Yes" on Form 990, Part I	v, line 11a. See F	orm 990,	
(4)	(a) Description			(b) Book value
(1)				
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.		•	
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11e or 11f.	See For	m 990, Part X,
	line 25.			
1.	(a) Description of liability			(b) Book value
(1) Federal in	come taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (h) must squal Form 000. Part V sol. (D) line 05.)			
	mn (b) must equal Form 990, Part X, col. (B) line 25.)	ization's financial stat	· tements th	at reports the
	s liability for uncertain tax positions under FASB ASC 740. Check here if the text			

Schedule D (Form 990) 2022 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

	Complete if the organization answered "Yes" on Form 990, P	Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements.		1	
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	2b		
С	Recoveries of prior year grants	2c		
d		2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	12.)	5	
Part	XII Reconciliation of Expenses per Audited Financial Statement	ents With Expenses pe	r Return.	
	Complete if the organization answered "Yes" on Form 990, P	Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С		2c		
d		2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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		
			1 1	
С	Add lines 4a and 4b		4c	
с 5	Add lines 4a and 4b		4c 5	
5 Part	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line</i> XIII Supplemental Information.	. 18.)	5	
5 Part Provid	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line</i> Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.)	; Part V, line 4;	Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line</i> XIII Supplemental Information.	9 18.)	; Part V, line 4;	Part X, line
5 Part Provice 2; Par	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line</i> Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	; Part V, line 4; formation.	
5 Part Provice 2; Par	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line</i> XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	9 18.)	; Part V, line 4; formation.	
5 Part Provice 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	e 18.)	; Part V, line 4; formation.	
5 Part Provice 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	9 18.)	; Part V, line 4; formation.	
5 Part Provic 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. He the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	9 18.)	; Part V, line 4; formation.	
5 Part Provic 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. We the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to the complete this part to t	9 18.)	; Part V, line 4; formation.	
5 Part Provic 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. We the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to the complete this part to t	9 18.)	; Part V, line 4; formation.	
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SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization	Employer identification number
Police Activities League of Southwest Washington	91-2072283
Form 990, Part VI, Section A, Line 6 - Board members are recruited and selected by vote of cur	rent board members.
Form 990, Part VI, Section A, Line 7b - Work of the organization is designated to the following of	committees: Executive Committee
Finance/Human Resources; Resource Development; Events; and Board Development. These c	
back to the board for approval.	······································
Form 990, Part VI, Section B, Line 11b - The draft return is reviewed by the Finance/Human Res	ource Committee. Once approved by the
committee, a copy is distributed to the entire board. An oral review of the document is present	
	······································
Form 990, Part VI, Section B, Line 12c - Each January and upon admission of a new board men	nber a Conflict of Interest policy is reviewed
and signed by each board member	
X	
Form 990, Part VI, Section B, Line 15 - The Executive Committee looks for comparable wage in	formation using community contracts and
professional human resource specialists. The comparable wage information and personal perf	
recommendation of wage increases for all staff are recommended to the full board for discussi	
-	
Form 990, Part VI, Section C, Line 19 - Many documents are available through our website. All a	are available upon request by appropriate
inquiry.	

Schedule O, Statement 1

Police Activities League of Southwest Washington

EIN: **91-2072283**

Form: Form 990 (2022)

Page: 2

Part III, Line 4d

Other Program Services Accomplishments

Activity Code	Description	Expense	Expense Grants		
	PAL provides programs year-round including mentoring groups in elementary, middle and high schools. Mentoring groups occur in all 6 local school districts and are offered monthly with over 150 total groups provided in 2022. Mentoring groups are facilitated by PAL staff, law enforcement and civilian volunteers and focus on interest topics selected by students such as leadership skills, safe driving, employment readiness, personal safety, civic engagement and more. 191 youth served	102,087	0	0	
	PAL is engaged in a wide range of community events and resource fairs. PAL collaborated with partners to provide over 100 new bikes and helmets at no cost to students as well as 50 food baskets and other need resources.	378	0	0	
Total:		102,465	0	0	