			EXTENDED TO AUGUST 15, 20		
	Ω	00	Return of Organization Exempt From	n Income Tax	OMB No. 1545-0047
Forr	n y	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	(except private foundati	ions) 2022
			Do not enter social security numbers on this form as it ma		Open to Public
Depa Interr	rtment o nal Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the late		Inspection
AF	or the	e 2022 calend	lar year, or tax year beginning $OCT\ 1$, 2022 and ending	<u>SEP 30, 202</u>	3
Bc	heck if		forganization	D Employer identi	fication number
a 		NEBR	ASKA ASSOCIATION FOR THE		
	Addre		ATION OF YOUNG CHILDREN INC		
	Name chang	pe Doing b	usiness as	26-0013	083
	Initial return	Number	and street (or P.O. box if mail is not delivered to street address)		
	Final return termir	ő-	J ST STE 23 23	402-476-	
_	ated]Amen	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	1,065,047.
	_lreturn		OLN, NE 68508-2915	H(a) Is this a group	
	Applic tion pendi		nd address of principal officer: TRACY GORDON	for subordinate	
<u> </u>		empt status:	AS C ABOVE	H(b) Are all subordinates	
-			X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or ASKAAEYC • ORG		a list. See instructions
	Vebsi			H(c) Group exempti	M State of legal domicile: NE
	art I	Summary			
			be the organization's mission or most significant activities: COMMITTE		TNG HIGH
Governance	•		CARE AND EDUCATION FOR YOUNG CHILDRE	N IN NEBRASK	A.
nar	2	Check this bo			
ver	_		ting members of the governing body (Part VI, line 1a)		1 40
ğ			lependent voting members of the governing body (r art vi, interta)		13
ŝ			of individuals employed in calendar year 2022 (Part V, line 2a)		
Activities &			of volunteers (estimate if necessary)		
ctiv			d business revenue from Part VIII, column (C), line 12		a 0.
◄			business taxable income from Form 990-T, Part I, line 11		ο Ο.
				Prior Year	Current Year
Ð	8	Contributions	and grants (Part VIII, line 1h)	979,525	
Revenue			ce revenue (Part VIII, line 2g)	4,098	
leve	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)	113	
щ	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	30	
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	983,766	
			milar amounts paid (Part IX, column (A), lines 1-3)	0	
			to or for members (Part IX, column (A), line 4)	0	
ses	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)	368,029	
ens	16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) 27,157.	0	. 0.
Expenses				(74.202	(20, 072)
-			es (Part IX, column (A), lines 11a-11d, 11f-24e)	674,363 1,042,392	
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)	-58,626	
<u>_s</u>	19	Revenue less	expenses. Subtract line 18 from line 12	Beginning of Current Year	
Net Assets or Fund Balances		Total accests //	Datt V line 16	306,888	
Asse Bal	20	Total assets (I		112,829	· 189,270.
Vet / und	21 22		; (Part X, line 26) fund balances. Subtract line 21 from line 20	194,059	
	art II	Signatur			- 255,110.
		-	I declare that I have examined this return, including accompanying schedules and st	atements, and to the best of r	my knowledge and belief it is
			. Declaration of preparer (other than officer) is based on all information of which prep		
,		,	· · · · · · · · · · · · · · · · · · ·	,	

Sign	Signature of officer		Date							
-	TRACY GORDON, EXECUTIVE									
	Type or print name and title									
	Print/Type preparer's name	Preparer's signature	Date Check PTIN							
Paid	EMILY E ARRIGO	EMILY E ARRIGO	01/29/24 ^{tf} self-employed P02165555							
Preparer	Firm's name HBE LLP		Firm's EIN 47-0677245							
Use Only	Firm's address 7140 STEPHANIE									
	LINCOLN, NE 685	Phone no. (402)423-4343								
May the I	RS discuss this return with the preparer showr	above? See instructions	X Yes No							
		lation and the compute instructions								

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2022)

1	t III Statement of Program Service Accomplishments	Pag
	Check if Schedule O contains a response or note to any line in this Part III	[
	Briefly describe the organization's mission: PROMOTE PROFESSIONAL DEVELOPMENT ACTIVITIES; ADVOCATE FOR ISSUES	
	RELATING TO CHILDREN AND FAMILIES; SERVE AS A RESOURCE FOR LOCAL	
	AFFILIATES AND FOR OTHER AGENCIES INVOLVED IN WORKING WITH AND FOR	
	CHILDREN & FAMILIES; DISSEMINATE INFORMATION SUPPORTIVE OF QUALITY	
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	s X
		s X
	If "Yes," describe these changes on Schedule O.	3
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expension	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses	s, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 368,915. including grants of \$) (Revenue \$	
	T.E.A.C.H. EARLY CHILDHOOD PROVIDES SCHOLARSHIPS TO HELP EARLY CAR	
	EDUCATION PROFESSIONALS COMPLETE COURSEWORK AT A LOCAL COLLEGE AND	WOR
	TOWARD A DEGREE IN EARLY CHILDHOOD EDUCATION.	
	(Code:) (Expenses \$ 540,922. including grants of \$) (Revenue \$ QUALITY ENHANCEMENT PROJECTS PROVIDE SUPPORT AND FUNDS TO A SELECT GROUP OF EARLY CHILDHOOD PROFESSIONALS WHO ARE INTERESTED IN ENHAN THE QUALITY OF THEIR EARLY CHILDHOOD PROGRAMS, COMPENSATION AND TH	CINC
		ETR
	LEADERSHID SKILLS	EIR
	LEADERSHIP SKILLS.	
	(Code:) (Expenses \$ 9,939. including grants of \$) (Revenue \$ 5	
	(Code:) (Expenses \$9,939. including grants of \$) (Revenue \$5 OTHER AGENCY MISSION PROJECTS STRENGTHEN AND SUPPORT THE EARLY	,288
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	(code:)(Expenses \$9,939. including grants of \$) (Revenue \$5 OTHER AGENCY MISSION PROJECTS STRENGTHEN AND SUPPORT THE EARLY CHILDHOOD COMMUNITY BY PROVIDING A VARIETY OF ADDITIONAL MISSION D PROJECTS AND SERVICES, SUCH AS SUPPORTING OUR MEMBER BASE, PROFESS	,288
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NEBRASKA	ASSC	CIATIC	DN	FOR	THE	2
EDUCATION	OF	YOUNG	CF	IILDE	REN	INC

Form 990 (2022)

Part IV Checklist of Required Schedules

1 In the organization described in section 501(c)[0] or 4947[40](1) other than a private foundation? I X 2 Is the organization engine in decir to riditer policial campaign activities on behalf of or in opposition to candidates for public office? If ''Ves,' complete Schedule C, Part I 3 X 4 Section 501(c)[3] organization. Did the organization engage in tabbying activities, or have a section 501(b) election in effect 4 X 5 Is the organization ascents on 501(c)[6] organization charts and effect and online array smill rudies or a semiller funds or ascents. Including assessmets of the provide advice on the distribution or investment of amounts in such funds or ascents. Including assemments how the right to provide advice on the distribution or investment of amounts in such funds or ascents. Including assemments how the right to provide advice on the distribution or investment of amounts in such funds or ascents. Including assemments how the right to provide advice on the distribution or investment of amounts in such funds or ascents. Including assemments how the again table. <i>Part II</i> 7 X 9 Did the organization matrix collections of works of art, historical treasures, or other similar assets? If ''Yes,' complete Schedule D, Part II 8 X 10 Did the organization regions on any or thread after the again and on restricted moments. 9 X 11 If the organization region and annount for the assets in Part X, line 10? If 'Yes,' complete Schedule D, Part II 10 </th <th></th> <th></th> <th></th> <th>Yes</th> <th>No</th>				Yes	No
2 Is the organization enguge in direct or hidder collical campaign activities on behalf of on topposition to candidates for public office? If "Yes," complete Schedule Q, Part I 3 X 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, on have a section 501(f) election in offect discretion for the activities on their activities on their activities. The activities on their activities and their offect discretion for the discretion for the discretion for the discretion for activities and their activities. On their activities and their offect discretion for any activities and their activities. The activities and their offect discretion for any activities and their activities and their activities. The activities and their activititis and their activities and their activities and their activities	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
B Dit the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public onlice? If "Yes," complete Schedule C, Part I B is the organization as social to Stol(d)S organization angage in lobbying activities, or have a section SDI(h) election in offect during the taxy year II "Yes," complete Schedule C, Part II D Dit the organization markina any doma advised finds or any sumini-finds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to the environment, historic land areas, or historic attructures // Yes, ' complete Schedule D, Part II B D D the organization marked and any summa segment, and the part, or debt negotiation services // If 'Yes, ' complete Schedule D, Part II B D D D the organization services // If 'Yes, ' complete Schedule D, Part II B D D D the organization and the integrate Schedule D, Part V B D D D the organization services // If 'Yes, ' complete Schedule D, Part V B D D D D d the organization services // If 'Yes, ' complete Schedule D, Part V B D D D D D D D organization services // If 'Yes, ' complete Schedule D, Part V B D D D D D D D D D organization services // If 'Yes, ' complete Schedule D, Part V B D D D D D D D D D D organization services // If 'Yes, ' complete Schedule D, Part V B D D D D D D D D D D D D D D D D D D D		If "Yes," complete Schedule A	1		
public office <i>III</i> 'Yes, 'complete Schedule <i>C</i> , <i>Part I</i> 3 X 4 Section 501(cg)3 organizations. Dth er organization engage I lobbying activities, or have a section 501(h) election in effect during the taxy year <i>II</i> 'Yes, 'complete Schedule <i>C</i> , <i>Part I</i> 4 X 5 Is the organization a section 501(cg)3 organization that receives membership dues, assessments, or amilar amounts as defined in Rive. Proc. 98:192 If 'Yes,' complete Schedule <i>D</i> , <i>Part II</i> 6 X 6 Ut the organization receive or hold a conservation esamemin, including assessments to preserve open space, the environment, historic all reas, or historic all treasures, or other's initial assets? If 'Yes,' complete Schedule <i>D</i> , <i>Part II</i> 7 X 8 Did the organization receive or hold a conservation esamemin, including assessments to preserve open space, the environment, historic all reas, or historic all treasures, or other's initial assets? If 'Yes,' complete Schedule <i>D</i> , <i>Part II</i> 8 X 9 Did the organization, receive or brough a related organization, hold assets in doron-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule <i>D</i> , <i>Part V</i> 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 171 'Yes,' complete Schedule <i>D</i> , <i>Part V</i> 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 12,	2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
4 Section 501(c)(3) organizations. Dot the organization engage in lobbying activities, or have a section 501(b) election in effect during the survey of Wirs, 'complete Schedule C, Part II 5 X 5 Is the organization action of the RP- Prog. 981(3) Wirs, 'complete Schedule D, Part II 5 X 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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or account fishilly, serve as a custodial more the environment, historic land areas, or historic attractures? If "Yes,' complete Schedule D, Part II 6 X 7 IX X 8 X 7 X 8 Did the organization maint and areas, or historic attractures? If "Yes,' complete Schedule D, Part II 7 X 9 Did the organization negotiation mont in Part X, line 21, for account results, or debt negotiation services? 7 X 10 Did the organization account fiability, serve as a custodial mont account fiability, serve as a policitise. 10 X 10 Datt the organization mont anount for investments - other securities in Part X, line 12, hart is 5% or more of its total assets reported in Part X, line 13, hart is 5% or more of its total assets reported in Part X, line 14, will re	3				v
during the tax year? If Yes," complete Schedule C, Part II. 4 X 5 Is the organization a section DI(4)(4) 501(6)(4) for S(10)(6) or S(10)(6) or S(10)(6) or Complete Schedule C, Part III. 5 X 6 Did the organization maintain any dono advised funds or any similar funds or accounts for which donors have the right to provide advised in the distribution or investment of amounts in such thands or accounts for which donors have the right to provide advised on the distribution or investment of amounts in such thands or accounts for Which donors have the right to provide advised on the distribution or investment of amounts in such thands or accounts for Which donors have the right to provide advised on the distribution or investment of amounts in such thands or accounts for Which donors have the right to provide advised advised of the provide advised by Part II. 6 X 7 X X 10 10 10 X 8 X 10 10 X 10 10 X 9 10 10 10 X 10 10 X 10 10 10 10 10 X 11 11 10 10 X 10 10 10 10 10 10 10 10 10			3		
6 Is the organization a section \$01(c)(4), \$01(c)(5), or \$01(c)(6) or \$01(c)(6) or \$01(c)(6) organization that as a defined in Rev. Proc. 98.197 if "Yes," complete Schedule C, Part II 5 X 7 Did the organization mainting any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment to amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds gasametits to previse as a custodian for amounts no listed in Part X, inp 21, for secret or or ustodial account liability, serve as a custodian for amounts in listed in Part X, inp 21, for secret or or outstodial account liability, serve as a custodian for an ontaxis in doments? If Yes, 'complete Schedule D, Part V 10 X 10 Did the organization report an amount for land, buildings, and equipment 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 V 10 X 10 Did the organization report an amount for other sactifies in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 17, this, 'complete Schedule D, Part V 10 X 10 Did the organization neport an amount for other sactifies in Part X,	4			v	
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7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic fand areas, or historic structures? If "kes," complete Schedule D, Part II 7 X 8 Did the organization maintain collection of works of art, historical treasures, or other similar asset? If "Yes," complete Schedule D, Part III 8 X 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? III "Yes," complete Schedule D, Part V 10 X 11 If the organization report an amount for investments - or in quasi endowments? If "Yes," complete Schedule D, Part V 11a X 12 Did the organization report an amount for investments - or norganization report an amount for investments - organization report an amount for investments rong an related in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? II "%s," complete Schedule D, Part VI 11a X 12 Did the organization report an amount for investments in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? II "%s," complete Schedule D, Part VI 11a X 13 Did the organization ispapartie consolididated financial statements	0		6		x
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13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garants or other assistance to or for any foreign 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 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," complete Schedule G, Part II 18 X 20a Did the organization operate one	b				
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domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			20b		<u> </u>
\mathbf{J}	21		.		x
	222000			990	

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4

NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN INC

			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 employees? If "Yes," complete			v
	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 through 24d and complete	04-		x
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
с С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		<u> </u>
C		24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	000		x
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200		
v	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash 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		Х
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 X
	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 controlled entity	054		
36	within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	35b		<u> </u>
30		36		x
37	It "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 50		<u> </u>
0.	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 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 109			
b				
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		37	
	(gambling) winnings to prize winners?	1c	X	
23200	4 12-13-22 5	Form	990	(2022)
	5			

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Form 990 (2022)

Part IV Checklist of Required Schedules (continued)

NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN INC

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
				Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a	8						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х				
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Г	3a		Х			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	F	3b					
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	F						
	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	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?							
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 so	licit						
	any contributions that were not tax deductible as charitable contributions?		6a		Х			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?		6b					
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the	e payor?	7a		Х			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	L	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			
	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	E E	7f					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as requi		7g					
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1	098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		0					
•	sponsoring organization have excess business holdings at any time during the year?	·····	8					
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?		9a					
a b	Did the sponsoring organization make any taxable distributions under section 4966?	F	9b					
10	Section 501(c)(7) organizations. Enter:		0.0					
	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
	Gross income from members or shareholders 11a							
	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							
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?	L	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 13b							
	Enter the amount of reserves on hand 13c							
	Did the organization receive any payments for indoor tanning services during the tax year?	Г	14a		Х			
	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				v			
	excess parachute payment(s) during the year?	·····	15		X			
40	If "Yes," see the instructions and file Form 4720, Schedule N.		40		v			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	······	16		X			
47	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities		17					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	·····	17					
	If "Yes," complete Form 6069.							

232005 12-13-22

Form 990 (2022)

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6 05030 NEBRASKA Form **990** (2022)

	NEBRASKA ASSOCIATION FOR THE 990 (2022) EDUCATION OF YOUNG CHILDREN INC t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	26–001 rough 7b below, and for			age 6 1se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O	. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI				Х
Sec	tion 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	1a 1	3		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b 1	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other			
	officer, director, trustee, or key employee?	-	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the				
-	of officers, directors, trustees, or key employees to a management company or other person?		3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 9		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass		5		Х
6			6	X	
	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or ap				
14			7a	x	
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, si		10		
D			76	x	
0	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the yea		7b		
8			0-	x	
	The governing body?		8a	X	
	Each committee with authority to act on behalf of the governing body?		8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read				v
<u></u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue Code.)			
				Yes	No
	Did the organization have local chapters, branches, or affiliates?		10a	Yes X	No
	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters, affiliates,		X	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch and branches to ensure their operations are consistent with the organization's exempt purposes? \dots	apters, affiliates,	10b	X X	No
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such ch and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body	apters, affiliates,		X	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such ch and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body Describe on Schedule O the process, if any, used by the organization to review this Form 990.	apters, affiliates, / before filing the form?	10b 11a	X X X	No
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20	State the name, address, and telephone	e number of the person who p	oossesses the organization's books and record
	AMANDA ROSS-HOFFER -	402-858-0994	-

650 J STREET, SUITE 23, LINCOLN, NE 68508-2915

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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.

Form 990 (2022)

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

(A)	(B) (C)							(D)	(E)	(F)
Name and title	Average	(da		Pos	ition	1 than		Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week	<u> </u>	cer an	nd a d	irecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	e			ated		organization	(W-2/1099-MISC/	from the
	related	istee	truste		e	pensi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tru	onal		ploye	t com		1099-NEC)		and related organizations
	line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) TRACY GORDON	40.00	=	<u> </u>	ò	¥	포뇽	R.			
EXECUTIVE DIRECTOR				x				91,130.	0.	2,630.
(2) REITTA GLESMANN	0.00									
BOARD MEMBER		x						0.	0.	Ο.
(3) CARRIE GOTTSCHALK	0.00									
BOARD MEMBER		X						0.	0.	0.
(4) QUENTIN BROWN	0.00									
BOARD MEMBER		X						0.	0.	0.
(5) JENNY WALLINGER	0.00									
SECRETARY		X		Х				0.	0.	0.
(6) KIM HALL	0.00									
BOARD MEMBER		Х						0.	0.	0.
(7) ROBIN KOLUMBAN	0.00									
PRESIDENT		Х		Х				0.	0.	0.
(8) JENNIFER MILLER	0.00									
BOARD MEMBER		X						0.	0.	0.
(9) DAWN MOLLENKOPF	0.00									-
BOARD MEMBER		X						0.	0.	0.
(10) JEFF PIPPITT	0.00									
BOARD MEMBER		X						0.	0.	0.
(11) CHANTEL TONKINSON	0.00									
BOARD MEMBER		X						0.	0.	0.
(12) BETSY TONNIGES	0.00									
BOARD MEMBER		X						0.	0.	0.
(13) CAMA CHARLET	0.00									_
BOARD MEMBER		X						0.	0.	0.
(14) MELISSA LARUE	0.00									-
BOARD MEMBER		X						0.	0.	0.
		<u> </u>					<u> </u>			
		-								
										- 000 (2222)

232007 12-13-22

Form 990 (2022)

09170129 758603 003624.000

8 2022.05030 NEBRASKA ASSOCIATION FOR TH 003624_1

_		A ASSOCIA								26 00	1 2 /	noc	-	0
Form Part		ON OF YOU								26-00	130	102	Ра	ge 8
	(A) Name and title		(B) Average ours per week				than is bot pr/trus	one h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other		
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS(1099-NEC)	MISC/ from			on ed
с	Subtotal Total from continuation sheets to Part	VII, Section A							91,130. 0. 91,130.		0.0.0.		,63 ,63	0.
2	Total (add lines 1b and 1c) Total number of individuals (including bu compensation from the organization),000 of reportable	• •		,	0
3	Did the organization list any former offic line 1a? If "Yes," complete Schedule J fo											3	Yes	No X
4	For any individual listed on line 1a, is the and related organizations greater than \$	sum of reportab	le co	omp	ensa	atior	n and	d ot	-	the organization		4		x
5	Did any person listed on line 1a receive or rendered to the organization? If "Yes," co	or accrue compe	nsat	tion	from	any	y unr	elat		idual for services		5		х
	ion B. Independent Contractors									¢100.000 of open				
	Complete this table for your five highest the organization. Report compensation f	-	-								Jensa	ation fro	om	
	(A) Name and busine	ss address	N	ONI	E				(B) Description of s	ervices	C	(C) ompen		1
								_						
	Total number of independent contractors \$100,000 of compensation from the orga		not li	mite	d to		se li: 0	stec	d above) who received n	nore than				
												Form 9	90 (2	022)

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Form 990 (2022)

NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN INC

Pa	rt VI		Statement of Revenue					
			Check if Schedule O contains a response	or note to any lir				<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	k	o N	Federated campaigns 1a Membership dues 1b Fundraising events 1c	5,005.				366110113 312 - 314
	e	e (All other contributions, gifts, grants, and	749,379. 304,867.				
d Or	ç	j ⊳	Noncash contributions included in lines 1a-1f					
aCo	ł	n T	Fotal. Add lines 1a-1f		1,059,251.			
				Business Code				
e)	2 8	a (CHAPTER INCOME	900099	3,634.	3,634.		
Program Service Revenue			CONTRACTUAL LABOR	900099	1,470.	1,470.		
Sei	Ċ	-			,			
am		 d						
2 B C B C		 9						
Pro		-	All other program service revenue					
			Fotal. Add lines 2a-2f	1	5,104.			
	3		nvestment income (including dividends, intere		- , -			
	•		other similar amounts)	,	508.			508.
	4		ncome from investment of tax-exempt bond p					
	5		Royalties					
	-		(i) Real	(ii) Personal				
	6 a	a (Gross rents 6a					
			_ess: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
			Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
	ł		_ess: cost or other basis					
en	-		and sales expenses 7b					
Revenue			Gain or (loss)					
Rev			Net gain or (loss)					
Other I		a G ii	Gross income from fundraising events (not ncluding \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18 8a					
			_ess: direct expenses8b					
			Net income or (loss) from fundraising events					
	9 a		Gross income from gaming activities. See					
			Part IV, line 19					
			_ess: direct expenses9b					
			Net income or (loss) from gaming activities					
	10 a		Gross sales of inventory, less returns					
			and allowances 10a					
			_ess: cost of goods sold10b					
	0		Net income or (loss) from sales of inventory					
sn		,	OTHER INCOME	Business Code 900099	184.	184.		
oeu ne		-	OTHER INCOME	900099	104.	104.		
Miscellaneous Revenue	k	-						
Sce	C	-						
Mi			All other revenue		184.			
			Fotal. Add lines 11a-11d		1,065,047.	5,288.	0.	508.
	12		Total revenue. See instructions		µ,005,04/.	,∠00.	J U.	
23200	9 12-1	13-22	2					Form 990 (2022)

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Form 990 (2022) EDUCATION Part IX Statement of Functional Expen	OF YOUNG CHIL	DREN INC	26-00	13083 Page 1
Section 501(c)(3) and 501(c)(4) organizations must co		er organizations must co	omplete column (A).	
Check if Schedule O contains a resp	oonse or note to any line in	this Part IX		
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organization	าร			
and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22				
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreig				
individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members	-			
5 Compensation of current officers, directors,	95,883.	79,296.	14,382.	2,205
trustees, and key employees	95,005.	19,290.	14,302.	2,203
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
7 Other salaries and wages		243,382.	9,808.	5,783
 8 Pension plan accruals and contributions (include 		215,5021		57703
section 401(k) and 403(b) employer contributions)	4,133.	3,924.	100.	109
9 Other employee benefits		2,096.		
IO Payroll taxes		15,936.	7,502.	2,501
I1 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting			9,586.	4,389
d Lobbying				
e Professional fundraising services. See Part IV, line 1				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25,	1.50		1.50	
column (A), amount, list line 11g expenses on Sch C			169.	
2 Advertising and promotion	10 071	2 200	2,061.	1 20/
I3 Office expenses		2,398.	10,167. 6,900.	1,300
I4 Information technology	·		0,900.	1,5/0
5 Royalties		2,312.	8,883.	6,314
16 Occupancy		12 FA1	0,003.	0,514

13,541.

1,643.

4,432.

317,181.

230,134.

1,023,996.

8,594. 1,777.

3,607.

13,541.

1,643.

693.

317,181.

230,134.

919,776.

5,069.

1,777.

394.

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Travel

Payments of travel or entertainment expenses for any federal, state, or local public officials ...

Conferences, conventions, and meetings

Interest

Payments to affiliates _____

Depreciation, depletion, and amortization

above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)

Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

Other expenses. Itemize expenses not covered

DIRECT PROGRAM COST

TEACH SCHOLARSHIP

LICENSE AND FEES

CHAPTER EXPENSES

.....

17

18

19

20

21

22

23

24

а

b

С

d

25

26

Insurance

e All other expenses

Check here

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11

Form 990 (2022)

1,133.

136.

1,703.

27,157.

2022.05030 NEBRASKA ASSOCIATION FOR TH 003624_1

2,606.

3,389.

1,510.

77,063.

-	000	(0000)
-om	990	(2022)

NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN INC

	1 990 (/ rt X	Balance Sheet	OONG	CHILDREN INC		20	0013063 Page 11
		Check if Schedule O contains a response or not	e to any l	ine in this Part X			
			-		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			41,673.	1	79,484.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			226,796.	3	241,325.
	4	Accounts receivable, net			31,624.	4	32,498.
	5	Loans and other receivables from any current of	r former o	fficer, director,			
		trustee, key employee, creator or founder, subs	tantial co	ntributor, or 35%			
		controlled entity or family member of any of the	se person	s		5	
	6	Loans and other receivables from other disquali	fied perso	ons (as defined			
		under section 4958(f)(1)), and persons describe	d in sectio	on 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			6,795.	9	9,237.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	13,127. 13,127.			
	b	Less: accumulated depreciation	10b	13,127.	0.	10c	0.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			0.	15	61,836.
	16	Total assets. Add lines 1 through 15 (must equ			306,888.	16	424,380.
	17	Accounts payable and accrued expenses	94,497.	17	109,342.		
	18	Grants payable				18	
	19	Deferred revenue			18,332.	19	18,000.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV of	Schedule D		21	
es	22	Loans and other payables to any current or form	ner officer	r, director,			
iliti		trustee, key employee, creator or founder, subs	tantial co	ntributor, or 35%			
Liabilities		controlled entity or family member of any of the	se person	s		22	
_	23	Secured mortgages and notes payable to unrela	ated third	parties		23	
	24	Unsecured notes and loans payable to unrelate	d third pa	irties		24	
	25	Other liabilities (including federal income tax, pa	yables to	related third			
		parties, and other liabilities not included on lines	s 1 7-24). (Complete Part X	•		64 000
		of Schedule D			0.	25	61,928.
	26	Total liabilities. Add lines 17 through 25			112,829.	26	189,270.
s		Organizations that follow FASB ASC 958, che	ck here	X			
JCe		and complete lines 27, 28, 32, and 33.			104 050		005 110
Net Assets or Fund Balances	27				194,059.	27	235,110.
	28	Net assets with donor restrictions		L	0.	28	0.
		Organizations that do not follow FASB ASC 9	58, chec	k here			
		and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or ec				30	
žΑ	31	Retained earnings, endowment, accumulated in				31	
ž	32	Total net assets or fund balances			194,059.	32	235,110.
	33	Total liabilities and net assets/fund balances	<u></u>		306,888.	33	424,380. Form 990 (2022)

Form **990** (2022)

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	NEBRASKA ASSOCIATION FOR THE			
Form	· · (/	6 - 001308	3 _F	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>	
			6 F	
1	Total revenue (must equal Part VIII, column (A), line 12)	1,0	<u>65,</u>	047.
2	Total expenses (must equal Part IX, column (A), line 25) 2	1,0	23,	996.
3	Revenue less expenses. Subtract line 2 from line 1			051.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		94,	059.
5	Net unrealized gains (losses) on investments5	·		
6	Donated services and use of facilities6			
7	Investment expenses7			
8	Prior period adjustments 8			
9	Other changes in net assets or fund balances (explain on Schedule O)			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		25	110
D -	column (B))) 2	35,	110.
Ра	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		_
		_	Ye	s No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			v
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on	а		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis		v	
b	Were the organization's financial statements audited by an independent accountant?		b X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate ba	isis,		
	consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au			
	review, or compilation of its financial statements and selection of an independent accountant?		c X	
~	If the organization changed either its oversight process or selection process during the tax year, explain on Schedu	ile O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		.	
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			0 (2022)
		Eo	m MM	4 1 (1)(1)(1)(1)

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SCHEDULE A						OMB No. 1545-0047
(Form 990)		rity Status ar				2022
		nization is a section 50 47(a)(1) nonexempt cha		n or a section		ZUZZ
Department of the Treasury	At	ttach to Form 990 or Fo	orm 990-EZ.			Open to Public
Internal Revenue Service		Form990 for instructio		nformation.		Inspection
Name of the organization	NEBRASKA ASSOC					identification number
Part I Reason for F	EDUCATION OF Y Public Charity Status.			Soo instruction		6-0013083
					15.	
The organization is not a priva	·	•		•		
	ion of churches, or associatic d in section 170(b)(1)(A)(ii). (/			()(A)().		
	perative hospital service orga	-		(iii).		
	organization operated in co			. ,)(iii). Enter	the hospital's name,
city, and state:						
5 An organization op	erated for the benefit of a co	llege or university owne	d or operated by a	governmental	unit describ	ed in
section 170(b)(1)(A)(iv). (Complete Part II.)					
	local government or governm	nental unit described in	section 170(b)(1)(A	A)(v).		
•	at normally receives a substa	intial part of its support	from a government	al unit or from I	the general	public described in
	A)(vi). (Complete Part II.)		+ 11 \			
	described in section 170(b)			iunction with a	land grant	collogo
	earch organization described on-land-grant college of agric					
university:	on land grant bollogo of agrio		. Enter the name, of	ity, and state o	r the coneg	
	at normally receives (1) more	than 33 1/3% of its sup	port from contribut	ions, members	hip fees, ar	nd gross receipts from
activities related to	its exempt functions, subjec	ct to certain exceptions;	and (2) no more that	an 33 1/3% of	its support	from gross investment
income and unrela	ted business taxable income	(less section 511 tax) fi	rom businesses acc	luired by the o	rganization	after June 30, 1975.
)(2). (Complete Part III.)					
	ganized and operated exclus	•	-			
-	ganized and operated exclus	-	-		-	
	oorted organizations describe 2d that describes the type o					
	ting organization operated, s		-		-	aivina
	ganization(s) the power to re	-		-		
organization. Yo	u must complete Part IV, Se	ections A and B.				
b 🗌 Type II. A suppo	rting organization supervised	d or controlled in connec	tion with its suppo	ted organizatio	on(s), by ha	ving
control or manag	ement of the supporting org	anization vested in the s	same persons that o	control or mana	age the sup	ported
	ou must complete Part IV,					
	ally integrated. A supporting				Illy integrate	ed with,
	ganization(s) (see instructions	, ,				
	ctionally integrated. A supp onally integrated. The organiz				•	
	instructions). You must con	v	•	•	u an allenti	
	the organization received a				II. Type III	
	rated, or Type III non-functio			<i>J</i> 1 <i>/ J</i> 1	<i>,</i> ,,	
f Enter the number of sup	ported organizations					
	ormation about the supporte		(iv) Is the organization listed	1		
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governing document	(v) Amount o support (see ir		(vi) Amount of other support (see instructions)
		above (see instructions))	Yes No		,	
				1		
			<u> </u>			
Total						

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Schedule A (Form 990) 2022 EDUCATION OF YOUNG CHILDREN INC
Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and

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

See	ction A. Public Support						
Cale	ndar 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.")	856,552.	782,281.	973,561.	979,525.	1,059,251.	4,651,170.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3	856,552.	782,281.	973,561.	979,525.	1,059,251.	4,651,170.
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.						4,651,170.
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c)2020 973,561.	(d) 2021 979,525.	(e) 2022	(f) Total
7	Amounts from line 4	856,552.	782,281.	973,561.	979,525.	1,059,251.	4,651,170.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,			104			
	and income from similar sources \dots	210.	209.	124.	113.	508.	1,164.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on \dots						
10	Other income. Do not include gain						
	or loss from the sale of capital	45 000	40 400	40 110	-4 4 - 4		046 800
	assets (Explain in Part VI.)	45,339.	43,109.	49,118.	51,174.	58,040.	246,780.
	Total support. Add lines 7 through 10						4,899,114.
	Gross receipts from related activities,		,			12	
13	First 5 years. If the Form 990 is for th	-	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
80	organization, check this box and stor		rooptogo				
	ction C. Computation of Publ			(1)		44	94.94 %
	Public support percentage for 2022 (14	<u> </u>
	Public support percentage from 2021					15	,,,
108	33 1/3% support test - 2022. If the c	-					
h	stop here. The organization qualifies 33 1/3% support test - 2021. If the o						
N.							
17-	and stop here. The organization qual 10% -facts-and-circumstances tes						
178	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	-	-	
h	10% -facts-and-circumstances tes	-		• • • •		17a and line 15 is	
	more, and if the organization meets the						
	organization meets the facts-and-circ						
18	Private foundation. If the organization						
				,,,	.,		(Form 990) 2022

NEBRASKA ASSOCIATION FOR THE

EDUCATION OF YOUNG CHILDREN INC Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Sup	oport						
Calendar year (or fiscal year be	eginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202	2 (f) Total
1 Gifts, grants, contribution	ons, and						
membership fees receiv	ved. (Do not						
include any "unusual gr	rants.")						
2 Gross receipts from adu merchandise sold or se formed, or facilities furn any activity that is relatu organization's tax-exem	ervices per- hished in ed to the						
3 Gross receipts from act	· · · –						
are not an unrelated tra	ade or bus-						
iness under section 513	3						
4 Tax revenues levied for	the organ-						
ization's benefit and eit							
or expended on its beh	alf						
5 The value of services or	r facilities						
furnished by a governm							
the organization withou	it charge						
6 Total. Add lines 1 throu	-						
7a Amounts included on lin	nes 1, 2, and						
3 received from disqual	· –						
b Amounts included on lines 2 ar from other than disqualified per exceed the greater of \$5,000 or amount on line 13 for the year	rsons that 1% of the						
c Add lines 7a and 7b							
8 Public support. (Subtract li	ine 7c from line 6.)						
Section B. Total Supp	port						
Calendar year (or fiscal year be		(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202	2 (f) Total
9 Amounts from line 6							
10a Gross income from inte dividends, payments re securities loans, rents, i and income from similar	eceived on royalties,						
b Unrelated business taxable	e income						
(less section 511 taxes) fro acquired after June 30, 19	75						
c Add lines 10a and 10b 11 Net income from unrela activities not included c whether or not the busi regularly carried on	ited business on line 10b,						
12 Other income. Do not ir or loss from the sale of assets (Explain in Part V	capital						
13 Total support. (Add lines 9,							
14 First 5 years. If the For	m 990 is for the	organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) org	anization,
check this box and sto							L
Section C. Computati	ion of Public	Support Pe	rcentage			. <u> </u>	
15 Public support percenta	age for 2022 (line	e 8, column (f), c	livided by line 13,	column (f))		15	%
16 Public support percenta						16	%
Section D. Computati							
17 Investment income per						17	%
18 Investment income per						18	%
19a 33 1/3% support tests							l line 17 is not
more than 33 1/3%, ch							
b 33 1/3% support tests							
line 18 is not more than							
20 Private foundation. If t	the organization of	did not check a	box on line 14, 19	a, or 19b, check t	this box and see in		
232023 12-09-22				16		Sche	dule A (Form 990) 2022

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NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN INC

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

Part IV Supporting Organizations

Schedule A (Form 990) 2022

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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10b | Schedule A (Form 990) 2022

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	rt IV	Supporting Organizations (continued)	10 001		у Га	ige 5
					Yes	No
11	Has t	he organization accepted a gift or contribution from any of the following persons?			100	
		son who directly or indirectly controls, either alone or together with persons described on lines 11b and				
	•	elow, the governing body of a supported organization?		11a		
b		hily member of a person described on line 11a above?		11b		
		6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide				
		in Part VI.		11c		
Sec	tion I	B. Type I Supporting Organizations	L			
					Yes	No
1	more direct <i>effect</i> <i>organ</i>	The governing body, members of the governing body, officers acting in their official capacity, or membership of a supported organizations have the power to regularly appoint or elect at least a majority of the organization's o cors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) tively operated, supervised, or controlled the organization's activities. If the organization had more than one supprization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	officers,	1		
2	Did th	e organization operate for the benefit of any supported organization other than the supported				
		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in				
	Part \	I how providing such benefit carried out the purposes of the supported organization(s) that operated,				
	super	vised, or controlled the supporting organization.		2		
Sec	tion (C. Type II Supporting Organizations				
					Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors				
	or tru	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control				
	or ma	nagement of the supporting organization was vested in the same persons that controlled or managed				
		ipported organization(s).		1		
Sec	tion I	D. All Type III Supporting Organizations				
			_		Yes	No
1	Did th	ne organization provide to each of its supported organizations, by the last day of the fifth month of the				
	organ	ization'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				
	organ	ization's governing documents in effect on the date of notification, to the extent not previously provided?	L	1		
2	Were	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported				
	organ	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how				
	the or	rganization maintained a close and continuous working relationship with the supported organization(s).	L	2		
3	By rea	ason of the relationship described on line 2, above, did the organization's supported organizations have a				
	signifi	icant voice in the organization's investment policies and in directing the use of the organization's				
	incom	ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's				
		orted organizations played in this regard.		3		
Sec		E. Type III Functionally Integrated Supporting Organizations				
1		k the box next to the method that the organization used to satisfy the Integral Part Test during the yea (see inst	ructions).			
а		The organization satisfied the Activities Test. Complete line 2 below.				
b		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.	tity (see insi	tructio		
2		ties Test. Answer lines 2a and 2b below.	E.		Yes	No
а		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of				
		upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify				
		e supported organizations and explain how these activities directly furthered their exempt purposes,				
		he organization was responsive to those supported organizations, and how the organization determined				
		hese activities constituted substantially all of its activities.	_	2a		
b		ne activities described on line 2a, above, constitute activities that, but for the organization's involvement,				
		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in				
		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.	L	2b		<u> </u>

- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. 232025 12-09-22

3b Schedule A (Form 990) 2022

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section 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):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e 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		
Section 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-functiona	lly integrate	ed Type III supporting org	anization (see

instructions).

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions Current Year 1 Amounts paid to supported organizations to accomplish exempt purposes of supported organizations, in excess of income from activity at a directly furthers exempt purposes of supported organizations. 1 2 Administrative expenses paid to accomplish exempt purposes of supported organizations. 3 4 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations. 4 5 Outlind directly in Part VI). See instructions. 6 6 Other distributions. Add lines 1 through 6. 7 7 Bothributions to attentive supported organizations to which the organization is responsive provide details in Part VI). See instructions. 8 9 Distributable amount for 2022 from Section C, line 6 9 9 10 IIII IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			YOUNG CHILDREN		2	6-0013083 Page 7
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8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020						
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b Excess from 2019						
c Excess from 2020						
d Excess from 2021		Excess from 2021				
e Excess from 2022						

Schedule A (Form 990) 2022

232027 12-09-22

	(Form 990) 2022 Supplemental Info			G CHILDREN		26-0013083 Pa a or 17b; Part III, line 12;
	Part IV. Section A. lines	1, 2, 3b, 3c, 4b, 4c, 5), lines 2 and 3; Part 1	5a, 6, 9a, 9b, 9c, 1 IV, Section E, lines	1a, 11b, and 11c; I 5 1c, 2a, 2b, 3a, and	Part IV, Section B, line d 3b; Part V, line 1; Pa	es 1 and 2; Part IV, Section C, Irt V, Section B, line 1e; Part V
32028 12-09-2	2			21		Schedule A (Form 990)

Schedule I	B
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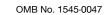
(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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



2022

Employer identification number

NEBRASKA	ASSC	CIATIC	DN	FOR	THE	3
EDUCATION	I OF	YOUNG	CH	IILDF	REN	INC

26-0013083

Organization type (check or	ne):
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

	B (Form 990) (2022)			Page 2	
	organization SKA ASSOCIATION FOR THE		Employ	yer identification number	
	TION OF YOUNG CHILDREN INC	26-0013083			
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	(d) Type of contribution	
1	COMMUNITY ACTION PARTNERSHIP OF LANCASTER	-		Person X	
	210 O STREET	\$\$55,8	877.	Payroll Noncash	
	LINCOLN, NE 68508			(Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	(d) Type of contribution	
2	NE CHILDREN AND FAMILY FOUNDATION			Person X Payroll	
	215 CENTENNIAL MALL, SUITE 200	\$\$293,	783.	Noncash (Complete Part II for	
	LINCOLN, NE 68508			noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	(d) Type of contribution	
3	NE DEPARTMENT OF EDUCATION	-		Person X	
	PO BOX 94987	\$\$\$\$\$	218.	Payroll Noncash (Complete Part II for	
	LINCOLN, NE 68509			noncash contributions.)	
(a)	(b)	(c) Total contributio		(d)	
<u>No.</u>	Name, address, and ZIP + 4 NE DEPARTMENT OF HEALTH AND HUMAN SERVICES		ons	Type of contribution Person	
	301 CENTENNIAL MALL, PO BOX 95026	\$ <u>254</u> ,	343.	Payroll Noncash	
	LINCOLN, NE 68509			(Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ons	(d) Type of contribution	
				Person Pavroll	
		\$\$		Noncash (Complete Part II for	
				noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	(d) Type of contribution	
				Person Payroll	
		\$\$		Noncash (Complete Part II for	
223452 11-1	5.22			noncash contributions.) Schedule B (Form 990) (2022)	
220402 11-1	0-22			Somedule D (FUIII 330) (2022)	

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Page	2

	B (Form 990) (2022)		Page 3
	rganization SKA ASSOCIATION FOR THE		Employer identification number
	TION OF YOUNG CHILDREN INC		26-0013083
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is neede	ed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
223453 11-15	5-22 24		Schedule B (Form 990) (2022)

09170129 758603 003624.000 2022.05030 NEBRASKA ASSOCIATION FOR TH 003624_1

Page 3

ame of orgar				Employer identification nu
	A ASSOCIATION FOR THE ON OF YOUNG CHILDREN			26-0013083
Part III Ex fro	xclusively religious, charitable, etc., contributi om any one contributor. Complete columns (a) mpleting Part III, enter the total of exclusively religious, c se duplicate copies of Part III if additional	ons to organizations described in through (e) and the following line e haritable, etc., contributions of \$1,000 o	ntry For organizations	or (10) that total more than \$1,000 for t
(a) No.				
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of g		of transferor to transferee
-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of g	 ift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of g	ift	
	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee
(a) No				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of g	 ift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee
				Schedule B (Form 990

SCHEDULE C	Po	olitical Campaign a	and Lobbyin	g Activities	OMB No. 1545-0047
(Form 990)			-	-	, 2022
	-	anizations Exempt From Incom if the organization is described			F7
Department of the Treasury Internal Revenue Service		to www.irs.gov/Form990 for in			EZ. Open to Public Inspection
If the organization ans	wered "Yes," or	n Form 990, Part IV, line 3, or Fo	rm 990-EZ, Part V, lir	ne 46 (Political Campa	aign Activities), then
	•	nplete Parts I-A and B. Do not cor	•		
		01(c)(3)) organizations: Complete	Parts I-A and C below	. Do not complete Part	I-B.
Section 527 organiz		,			
-		n Form 990, Part IV, line 4, or Fo			
	-	have filed Form 5768 (election un have NOT filed Form 5768 (electio		-	
	-	Form 990, Part IV, line 5 (Prox)			
Tax) (See separate inst					
 Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name of organization	-	A ASSOCIATION FOR	R THE	E	mployer identification number
		ON OF YOUNG CHILI			26-0013083
Part I-A Compl	ete if the org	panization is exempt unde	er section 501(c)	or is a section 52	7 organization.
1 Provide a descripti	on of the organiz	ation's direct and indirect politica	al campaign activities i	n Part IV.	
		ures			
3 Volunteer hours for	r political campai	gn activities			
Part I-B Compl	ata if tha are	anization is exempt und	r agation E01(a)	(2)	
· · · · · ·		anization is exempt unde			<u></u>
		incurred by the organization under incurred by organization manage			
		n 4955 tax, did it file Form 4720 f			
b If "Yes," describe in					
		panization is exempt unde	er section 501(c),	, except section 5	601(c)(3).
1 Enter the amount of	lirectly expended	d by the filing organization for sec	tion 527 exempt funct	tion activities	\$
2 Enter the amount of	of the filing organ	ization's funds contributed to oth	er organizations for se	ection 527	
exempt function ac	tivities				\$
3 Total exempt funct	ion expenditures	. Add lines 1 and 2. Enter here ar	nd on Form 1120-POL,	3	
		1120-POL for this year?			
		nployer identification number (EIN	• •	-	
	-	tion listed, enter the amount paid omptly and directly delivered to a			-
		additional space is needed, provi			parate segregated fund of a
· · ·	, ,	(b) Address	1		om (e) Amount of political
(a) Name	5	(b) Address	(c) EIN	(d) Amount paid fro	.,
				funds. If none, enter	-0 promptly and directly
					delivered to a separate political organization.
					If none, enter -0
				+	
			1	1	
For Paperwork Reduct	ion Act Notice.	see the Instructions for Form 9	90 or 990-EZ.	•	Schedule C (Form 990) 2022
LHA					

232041 11-08-22

	NEBRAS	SKA ASSOCIATION FOR THE							
Sche	edule C (Form 990) 2022 EDUCA	TION OF YOUNG CHILDREN INC	26-0	013083 Page 2					
Pa	rt II-A Complete if the organizatio	n is exempt under section 501(c)(3) and fi	led Form 5768 (el	ection under					
	section 501(h)).								
A	A Check 🔲 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,								
	expenses, and share of exces	s lobbying expenditures).							
B	Check 🔲 if the filing organization check	ed box A and "limited control" provisions apply.							
		ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals					
1a	Total lobbying expenditures to influence publ	ic opinion (grassroots lobbying)							
b	Total lobbying expenditures to influence a leg	islative body (direct lobbying)	352.						
с	Total lobbying expenditures (add lines 1a and	l 1b)	352.						
d	Other exempt purpose expenditures		1,023,644.						
е	Total exempt purpose expenditures (add lines	s 1c and 1d)	1,023,996.						
f	Lobbying nontaxable amount. Enter the amou	unt from the following table in both columns.	177,400.						
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:							
	Not over \$500,000	20% of the amount on line 1e.							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.							
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.							
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.							
	Over \$17,000,000	\$1,000,000.							
g	Grassroots nontaxable amount (enter 25% of	line 1f)	44,350.						
h	Subtract line 1g from line 1a. If zero or less, e	nter -0-	0.						
i	Subtract line 1f from line 1c. If zero or less, er	nter -0-	0.						
j	If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720							
	reporting section 4911 tax for this year?			Yes No					
		4-Year Averaging Period Under Section 501(h)							
	(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.								

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total			
2a Lobbying nontaxable amount	164,273.	166,872.	179,239.	177,400.	687,784.			
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					1,031,676.			
c Total lobbying expenditures	280.	280.	280.	352.	1,192.			
d Grassroots nontaxable amount	41,068.	41,718.	44,810.	44,350.	171,946.			
e Grassroots ceiling amount (150% of line 2d, column (e))					257,919.			
f Grassroots lobbying expenditures								

Schedule C (Form 990) 2022

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NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN INC

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description			(b)	
of the	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? \dots				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5)	, or se	ection	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR (b			e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
с	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	political			
	expenditures next year?		4		
_5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
Prov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A,	lines 1 a	and 2 (See	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2022

232043 11-08-22

SC		Supplementa	al Financial Statements		OMB No. 1545-0047
	n 990)	Complete if the orga	nization answered "Yes" on Form 990,		2022
Department of the Treasury Atta			, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. .ttach to Form 990.		Open to Public
Interna	Revenue Service	110001 0011 1 0000T1 DT	0 for instructions and the latest information.		Inspection
Nam	e of the organization	on NEBRASKA ASSOCIATI EDUCATION OF YOUNG			identification number 6-0013083
Pa	t I Organiza		ed Funds or Other Similar Funds or A		
Fai	-	n answered "Yes" on Form 990, Part IV, lir		ACCOUNTS.	Complete il the
				(b) Funds an	d other accounts
1	Total number at er	nd of year			
2		f contributions to (during year)			
3	Aggregate value of	f grants from (during year)			
4		t end of year			
5	-		writing that the assets held in donor advised fur		
•			exclusive legal control?		Yes No
6	•		advisors in writing that grant funds can be used	2	
			or donor advisor, or for any other purpose confe	•	Yes No
Pa	t II Conserva	ation Easements. Complete if the ord	ganization answered "Yes" on Form 990, Part IV	/. line 7.	
1		servation easements held by the organizat		,	
		of land for public use (for example, recrea	· · · · · · · · · · · · · · · · · · ·	orically impo	tant land area
	Protection o	f natural habitat	Preservation of a cert	ified historic	structure
	Preservation	of open space			
2			fied conservation contribution in the form of a c		
	day of the tax year				at the End of the Tax Year
-				2a	
b				2b	
		vation easements on a certified historic str vation easements included in (c) acquired	ructure included in (a)	2c	
u				2d	
3			leased, extinguished, or terminated by the orga		ng the tax
	year	, , ,	, , , , , ,		5
4	Number of states v	where property subject to conservation ea	sement is located		
5	Does the organizat	tion have a written policy regarding the pe	riodic monitoring, inspection, handling of		
			it holds?		Yes No
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservat	ion easemen	ts during the year
_		<u> </u>			
7	Amount of expens	es incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation e	asements du	ring the year
8		viation assement reported on line 2(d) abov	ve satisfy the requirements of section 170(h)(4)(
0					Yes No
9			ion easements in its revenue and expense state		
		•	note to the organization's financial statements t		s the
		ounting for conservation easements.	-		
Pa		-	f Art, Historical Treasures, or Other	Similar A	ssets.
		the organization answered "Yes" on Form			
1a			58, not to report in its revenue statement and ba		
			blic exhibition, education, or research in furthera	ance of public	2
h	· •		ncial statements that describes these items.		vo of
b			58, to report in its revenue statement and baland c exhibition, education, or research in furtherand		
		ng amounts relating to these items:			
	•	. .		\$	
2	.,		asures, or other similar assets for financial gain	, provide	
		unts required to be reported under FASB A			
а			-	\$	
b	Assets included in	Form 990, Part X		\$	
LHA	For Paperwork Re	eduction Act Notice, see the Instruction	s for Form 990.	Sche	dule D (Form 990) 2022
23205	1 09-01-22		20		
			29		

09170129 758603 003624.000 2022.05030 NEBRASKA ASSOCIATION FOR TH 003624_1

		A ASSOCIAT							
		ON OF YOUN						013083	
Par	t III Organizations Maintaining C	Collections of A	rt, Historio	al Tre	easures, o	or Other	Similar As	sets(continu	ed)
3	Using the organization's acquisition, accessi collection items (check all that apply):	on, and other record	ls, check any	of the f	ollowing tha	at make sigi	nificant use of	its	
а	Public exhibition	d	Loan	or exch	ange progra	am			
b	Scholarly research	e							
c	Preservation for future generations	-							
4	Provide a description of the organization's co	ollections and explai	n how thev fi	urther th	e organizati	on's exemr	ot purpose in F	Part XIII.	
5	During the year, did the organization solicit of							are / an	
Ŭ	to be sold to raise funds rather than to be ma		-		-			Yes	🗌 No
Par	t IV Escrow and Custodial Arran								
	reported an amount on Form 990, Pa		sto il tilo orge	Inzation	anoworod		5111 000, 1 uit	10, 1110 0, 01	
	Is the organization an agent, trustee, custod		liary for cont	ibutions	s or other as	sets not in	cluded		
14	on Form 990, Part X?							Yes	No
h	If "Yes," explain the arrangement in Part XIII								
, N		and complete the lo	nowing table					Amount	
~	Reginning balance						1c	,	
	Beginning balance						1d		
	Additions during the year						1e		
-	Distributions during the year						1f		
f	Ending balance Did the organization include an amount on F							Yes	
	•		-						
	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i								
1 41		(a) Current year	(b) Prior y				Three years ba	ck (e) Four v	ears hack
4		(a) ourrent year		cai	(C) 110 your		rinico youro bu		
	Beginning of year balance								
	Contributions								
	Net investment earnings, gains, and losses								
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur		e (line 1g, co	lumn (a)) held as:				
а	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
С		%							
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.							
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are	held ar	nd administe	ered for the		_	
	organization by:							Y	es No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	red on Schec	lule R?				3b	
	Describe in Part XIII the intended uses of the	Q	wment funds	6.					
Par	t VI Land, Buildings, and Equipm	nent.							
	Complete if the organization answere	d "Yes" on Form 990), Part IV, line	e 11a. Se	ee Form 990), Part X, lir	ie 10.		
	Description of property	(a) Cost or o basis (investr) Cost (basis (or other other)	• •	umulated eciation	(d) Book	value
1 a	Land								
	Buildings								
	Leasehold improvements								
	Equipment			1:	3,127.	1	3,127.		0.
	Other								
	Add lines 1a through 1e. (Column (d) must e		X, column (B), line 1()c.)				0.

Schedule D (Form 990) 2022

232052 09-01-22

NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN INC

Schedule D (Form 990) 2022 EDUCATION	OF YOUNG CHILD	REN INC	26-0013083 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Ye	es" on Form 990, Part IV, line	11b. See Form 990, Part X	۲, line 12.
(a) Description of security or category (including name of securit	(b) Book value	(c) Method of valuation	on: Cost or end-of-year market value
1) Financial derivatives			-
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related			
Complete if the organization answered "Ye	es" on Form 990, Part IV, line	11c. See Form 990, Part X	K, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation	on: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Ye		11d. See Form 990, Part X	
	(a) Description		(b) Book value
(1) RIGHT OF USE ASSETS			61,836
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B)	line 15.)		61,836
Part X Other Liabilities.			
Complete if the organization answered "Ye	es" on Form 990 Part IV line	11e or 11f. See Form 990	Part X line 25
			(b) Book value
			(b) Dook value
(1) Federal income taxes			61.020
(2) LEASE LIABILITIES			61,928
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B)	line 25)		61,928
			al statements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

232053 09-01-22

	NEBRASKA ASSOCIATION FOR T	HE		
Sche	dule D (Form 990) 2022 EDUCATION OF YOUNG CHILDRE	EN INC	26-0	0013083 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Rever	nue per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	1.		
1	Total revenue, gains, and other support per audited financial statements			1,065,047.
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			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	1,065,047.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	0.
-	Tatal wave Additions O and A. (This report served Farme 000 Dart / line 10)		5	1,065,047.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		•	
	rt XII Reconciliation of Expenses per Audited Financial Staten		•	
		nents With Expe	•	rn.
	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With Expe	nses per Retu	
Pa	Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	nents With Expe	nses per Retu	rn.
Pa 1	TXII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	nents With Expe	nses per Retu	rn.
Pa 1 2	T XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With Expe	nses per Retu	rn.
Pa 1 2 a	Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b	nses per Retu	rn.
Pa 1 2 a	XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c	nses per Retu	rn.
Pa 1 2 a b c d	XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	nses per Retu	rn. 1,023,996. 0.
Pa 1 2 a b c d	TXII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	nses per Retu	rn.
Pa 1 2 a b c d e	t XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	nses per Retu	rn. 1,023,996. 0.
Pa 1 2 a b c d e 3	t XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2b 2c 2c 2d	nses per Retu	rn. 1,023,996. 0.
Pa 1 2 a b c d e 3 4	t XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	nses per Retu	rn. 1,023,996. 0.
Pa 1 2 a b c d e 3 4 a	t XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d	nses per Retu	rn. <u>1,023,996</u> . <u>0.</u> <u>1,023,996</u> . 0.
Pa 1 2 a b c d e 3 4 a b c 5	t XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d	nses per Retu	rn. 1,023,996. 0.

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

PART X, LINE 2:

NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUND CHILDREN, INC. IS EXEMPT
FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE
CODE, EXECPT ON NET INCOME DERIVED FROM UNRELATED BUSINESS ACTIVITIES.
FOR THE YEAR ENDED SEPTEMBER 30, 2023, THE ORGANIZATION HAD NO TAX
LIABILITY ON UNRELATED BUSINESS ACTIVITY. THE ORGANIZATION BELIEVES THAT
IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES
NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL
STATEMENTS.

32

232054 09-01-22

Schedule D	(Form 990)) 2022
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art XIII Supplemental Inform							
					Soho	dulo D) (Form 99
2055 09-01-22			22		Scher	uule D	96 1110 11 99
70129 758603 003624.	000 20	22.05030	33 NEBRASKA	ASSOCIATION	FOR	тн	00362

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

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

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

NEBRASKA ASSOCIATION FOR THE Name of the organization EDUCATION OF YOUNG CHILDREN INC

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

SERVICES, EDUCATION AND CARE FOR CHILDREN AND THEIR FAMILIES.

FORM 990, PART VI, SECTION A, LINE 6:

NEBRASKA AEYC IS ORGANIZED WITH MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

LOCAL AFFILIATES AND CHAPTERS ELECT BOARD MEMBERS TO REPRESENT THEM. OTHER

CATEGORIES, SUCH AS PUBLIC SCHOOL REPRESENTATIVE AND ATTORNEY, ARE FILLED

THROUGH THE BOARD NOMINATIONS COMMITTEE AND VOTED ON BY THE FULL

MEMBERSHIP.

FORM 990, PART VI, SECTION A, LINE 7B:

THE MEMBERS ARE REPRESENTED BY THEIR BOARD REPRESENTATIVE. DECISIONS FOR

WHICH A TOTAL MEMBERSHIP VOTE IS GATHERED ARE CHANGES IN THE BY-LAWS AND

CERTAIN BOARD VACANCIES.

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

THE INTERNAL ACCOUNTANT REVIEWS THE FORM 990 AFTER PREPARATION BY THE CPA

FIRM; IT IS EMAILED TO THE BOARD MEMBERS; THEN IT IS REVIEWED WITH THE

BOARD BY A MEMBER OF THE CPA FIRM AND INTERNAL STAFF PRIOR TO FILING.

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

BOARD MEMBERS AND KEY EMPLOYEES SIGN A CONFLICT OF INTEREST POLICY

ANNUALLY.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22

Schedule O (Form 990) 2022

OMB No 1545-0047

Open to Public

Inspection

Employer identification number 26-0013083

L

Name of the organization NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN INC	Employer identification number 26-0013083
FORM 990, PART VI, SECTION B, LINE 15A:	
THE MEMBERS OF THE BOARD OF DIRECTORS REVIEW AND SET THE	EXECUTIVE
DIRECTORS' COMPENSATION AFTER REVIEWING AND COMPARING IT	TO INDUSTRY
STANDARDS	
FORM 990, PART VI, SECTION C, LINE 19:	
INFORMATION IS AVAILABLE UPON REQUEST AT 650 J ST., STE	23, LINCOLN, NE

68508 DURING NORMAL BUSINESS HOURS

PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.