

Form **990**

EXTENDED TO MAY 15, 2026
Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2024 calendar year, or tax year beginning **JUL 1, 2024** and ending **JUN 30, 2025**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PROJECT OF EASTON, INC.		D Employer identification number 23-1699851
	Doing business as		E Telephone number 610-258-4361
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 3,417,300.
	320 FERRY STREET		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City or town, state or province, country, and ZIP or foreign postal code EASTON, PA 18042		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
F Name and address of principal officer: KIMBERLY CHECKEYE SAME AS C ABOVE		If "No," attach a list. See instructions	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number	
J Website: WWW.PROJECTEASTON.ORG		L Year of formation: 1968 M State of legal domicile: PA	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROJECT'S MISSION IS TO BUILD A BETTER COMMUNITY BY HELPING PEOPLE TO HELP THEMSELVES. PROJECT		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	18
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5 Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	39
	6 Total number of volunteers (estimate if necessary)	6	181
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	2,342,940.	3,210,215.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	98,249.	140,109.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,444,175.	3,321,796.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	661,093.	714,420.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,308,318.	1,351,194.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	190,078.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	380,812.	369,243.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,350,223.	2,434,857.	
19 Revenue less expenses. Subtract line 18 from line 12	93,952.	886,939.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	4,740,281.	5,803,141.
	22 Net assets or fund balances. Subtract line 21 from line 20	119,360.	142,133.
		4,620,921.	5,661,008.

Part II Signature Block

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

Sign Here	<input checked="" type="checkbox"/> Signature of officer <i>Kimberly J. Checkeye</i>	Date 5/12/26
	KIMBERLY CHECKEYE, EXECUTIVE DIRECTOR Type or print name and title	

Paid Preparer Use Only	Preparer's name TARA L. BENDER, CPA	Preparer's signature <i>Tara L. Bender</i>	Date 05/07/26	Check if self-employed <input type="checkbox"/>	PTIN P00299403
	Firm's name CAMPBELL RAPPOLD & YURASITS LLP	Firm's EIN 23-1386942		Phone no. (610) 435-7489	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: PROJECT OF EASTON, INC.'S MISSION IS TO "BUILD A BETTER COMMUNITY BY HELPING PEOPLE TO HELP THEMSELVES" AND EDUCATION IS KEY. PROJECT WAS FOUNDED IN 1968 BY PROTESTANT, JEWISH, AND CATHOLIC COMMUNITY LEADERS TO PROVIDE COORDINATED SERVICES TO AN UNDERSERVED POPULATION IN

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 1,049,183. including grants of \$ 46,696.) (Revenue \$ 4,537.)

LIFELONG LEARNING: EDUCATION SERVICES ADULT LITERACY: PROJECT'S SUCCESS ACADEMY PROVIDES AN ADULT LITERACY PROGRAM THAT PREPARES DISADVANTAGED ADULTS FOR THE WORKFORCE. COURSES INCLUDE GED PREPARATION, ENGLISH AS A SECOND LANGUAGE, AND ADULT BASIC EDUCATION. OUR CERTIFIED TEACHERS USE REAL-WORLD CONTEXTS TO PREPARE STUDENTS FOR SUCCESS IN COLLEGE, TRAINING PROGRAMS, AND/OR EMPLOYMENT. IN ADDITION TO CLASSROOM INSTRUCTION, TUTORS WORK WITH STUDENTS ONE-ON-ONE TO PREPARE THEM FOR THE GED TEST, U.S. CITIZENSHIP TEST, OR TO IMPROVE THEIR ENGLISH-LANGUAGE SKILLS. EACH STUDENT RECEIVES PERSONAL, EDUCATIONAL, AND ECONOMIC SUPPORT, INCLUDING ACCESS TO PROJECT'S FOOD PANTRY AND EMERGENCY ASSISTANCE SERVICES AS NEEDED. OUR PROGRAM PREPARES ADULTS TO SUCCESSFULLY CARRY OUT THEIR ROLES AND

4b (Code:) (Expenses \$ 873,927. including grants of \$ 667,638.) (Revenue \$)

MEETING BASIC NEEDS EMERGENCY ASSISTANCE: OUR EMERGENCY ASSISTANCE PROGRAM IS COMMITTED TO HELPING PEOPLE MEET THEIR MOST BASIC NEEDS AS A FOUNDATION ON WHICH TO BUILD THEIR CAPACITY TO CARE FOR THEMSELVES AND MOVE OUT OF CRISIS. OUR PROGRAM PROVIDES SAFETY-NET SUPPORT, INCLUDING ACCESS TO SHELTER, RENTAL ASSISTANCE, AND UTILITY SUPPORT. USING OUR LONGSTANDING RELATIONSHIPS IN THE COMMUNITY, OUR CASE MANAGERS ALSO PROVIDE INFORMATION AND REFERRALS TO COMMUNITY RESOURCES, INCLUDING OUR OWN FOOD PANTRY, EDUCATION AND LIFE SKILLS PROGRAMMING, ENSURING A MORE SEAMLESS CONTINUUM OF SUPPORT. GOAL: THE GOAL OF THE ASSIST PROGRAM IS TO HELP PEOPLE LIVING IN POVERTY MEET THEIR BASIC MATERIAL NEEDS SO THAT THEY HAVE A STABLE

4c (Code:) (Expenses \$ 85,332. including grants of \$ 86.) (Revenue \$)

MOVING TO SELF-SUFFICIENCY: COMMUNITY SUPPORTIVE SERVICES STUDENT SUCCESS PROGRAM: PROJECT'S STUDENT SUCCESS PROGRAM (SSP) IS DESIGNED TO CLOSE THE ACHIEVEMENT GAP FOR AT-RISK ELEMENTARY AND MIDDLE SCHOOL CHILDREN AND ENSURE THEIR ULTIMATE SCHOOL SUCCESS AND GRADUATION BY PROMOTING LIFE SKILLS AND POSITIVE SCHOOL ENGAGEMENT.

2024-2025 RESULTS

THROUGH THE IMPLEMENTATION OF THE EVIDENCE-BASED BOTVIN LIFE SKILLS TRAINING PROGRAM STUDENTS LEARN THE SKILLS NECESSARY TO MAKE POSITIVE DECISIONS, RESIST SOCIAL (PEER) PRESSURES TO SMOKE, DRINK, AND USE DRUGS AND ULTIMATELY TO REMAIN ENGAGED IN SCHOOL AND GRADUATE.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 2,008,442.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefits, and other IRS filings.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 18		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 18		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	PA, NJ
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain on Schedule O)	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	
20	State the name, address, and telephone number of the person who possesses the organization's books and records KIMBERLY CHECKEYE, EXECUTIVE DIRECTOR - 610-258-4361 320 FERRY STREET, EASTON, PA 18042	

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KIM CHECKEYE CEO/EXECUTIVE DIRECTOR	50.00	X		X				138,750.	0.	3,917.
(2) SHARON DIFELICE PRESIDENT	4.00	X		X				0.	0.	0.
(3) LINDA TRETIAK VICE PRESIDENT	4.00	X		X				0.	0.	0.
(4) CARY GIACALONE II TREASURER	4.00	X		X				0.	0.	0.
(5) ERIN DEUTSCH SECRETARY	4.00	X		X				0.	0.	0.
(6) ALAN S. ABRAHAM BOARD MEMBER	4.00	X						0.	0.	0.
(7) WILLIAM D. BRYSON BOARD MEMBER	2.00	X						0.	0.	0.
(8) DEBRA ASHTON-CHASE BOARD MEMBER	2.00	X						0.	0.	0.
(9) DANIEL E. COHEN BOARD MEMBER	2.00	X						0.	0.	0.
(10) APOSTLE MISTY HOLMES DORSEY BOARD MEMBER	2.00	X						0.	0.	0.
(11) PETE REINKE BOARD MEMBER	2.00	X						0.	0.	0.
(12) JONATHAN ASAYAG BOARD MEMBER	2.00	X						0.	0.	0.
(13) THOMAS SCHLEGEL BOARD MEMBER	2.00	X						0.	0.	0.
(14) ANDREA SCHWARTZ BOARD MEMBER	2.00	X						0.	0.	0.
(15) MARY WILFORD-HUNT BOARD MEMBER	2.00	X						0.	0.	0.
(16) DR. ERNEST JEFFRIES BOARD MEMBER	2.00	X						0.	0.	0.
(17) OFFICER RYAN SEIPLE BOARD MEMBER	2.00	X						0.	0.	0.

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	113,154.				
	b Membership dues	1b					
	c Fundraising events	1c	106,943.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	707,672.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	2,282,446.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 553,817.				
	h Total. Add lines 1a-1f			3,210,215.			
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		140,062.			140,062.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	20,469.			
			(ii) Personal				
	b Less: rental expenses ...	6b	49,181.				
	c Rental income or (loss)	6c	-28,712.				
	d Net rental income or (loss)			-28,712.		-28,712.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	20,108.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	20,061.				
	c Gain or (loss)	7c	47.				
d Net gain or (loss)			47.		47.		
8 a Gross income from fundraising events (not including \$ 106,943. of contributions reported on line 1c). See Part IV, line 18	8a		21,249.				
b Less: direct expenses	8b	26,262.					
c Net income or (loss) from fundraising events			-5,013.		-5,013.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a OTHER INCOME	Business Code	900099	3,597.	3,597.		
	b PROGRAM SERVICE INCOME		900099	1,600.	1,600.		
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d			5,197.			
12 Total revenue. See instructions			3,321,796.	5,197.	0.	106,384.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response 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 organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	714,420.	714,420.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	148,148.	82,296.	24,321.	41,531.
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	1,025,957.	801,890.	116,894.	107,173.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	15,409.	10,900.	1,564.	2,945.
9 Other employee benefits	84,911.	68,216.	11,523.	5,172.
10 Payroll taxes	76,769.	63,027.	5,965.	7,777.
11 Fees for services (nonemployees):				
a Management				
b Legal	1,850.		1,850.	
c Accounting	14,900.		14,900.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	15,288.		15,288.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	64,964.	57,429.	5,664.	1,871.
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	103,188.	94,702.	8,486.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	50,327.	47,408.	1,751.	1,168.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a OPERATING EXPENSES	109,550.	67,853.	20,709.	20,988.
b OTHER	7,422.		7,422.	
c VOLUNTEER & DONOR EXPEN	1,754.	301.		1,453.
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	2,434,857.	2,008,442.	236,337.	190,078.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	287,910.	1	895,759.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	273,993.	3	20,424.
	4 Accounts receivable, net	174,067.	4	137,814.
	5 Loans and other receivables from 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	21,309.	9	34,865.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,212,154.		
	b Less: accumulated depreciation	10b 703,457.	969,073.	10c 1,508,697.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	3,001,541.	12	3,165,238.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	12,388.	15	40,344.
16 Total assets. Add lines 1 through 15 (must equal line 33)	4,740,281.	16	5,803,141.	
Liabilities	17 Accounts payable and accrued expenses	106,972.	17	98,508.
	18 Grants payable		18	
	19 Deferred revenue		19	281.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	12,388.	25	43,344.
	26 Total liabilities. Add lines 17 through 25	119,360.	26	142,133.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,756,927.	27	2,317,800.
	28 Net assets with donor restrictions	2,863,994.	28	3,343,208.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	4,620,921.	32	5,661,008.
33 Total liabilities and net assets/fund balances	4,740,281.	33	5,803,141.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,321,796.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,434,857.
3	Revenue less expenses. Subtract line 2 from line 1	3	886,939.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,620,921.
5	Net unrealized gains (losses) on investments	5	153,148.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	5,661,008.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
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? _____		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2024)

Part II 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1807003.	1995815.	1986343.	2342940.	2231464.	10363565.
2 Tax revenues levied for the organization'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						
4 Total. Add lines 1 through 3	1807003.	1995815.	1986343.	2342940.	2231464.	10363565.
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)						
6 Public support. Subtract line 5 from line 4.						10363565.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	1807003.	1995815.	1986343.	2342940.	2231464.	10363565.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	59,237.	107,632.	83,898.	97,104.	160,531.	508,402.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	3,011.	2,744.	3,164.	3,840.	5,197.	17,956.
11 Total support. Add lines 7 through 10						10889923.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	95.17 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	95.80 %
16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year. Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

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

PART II, SECTION A. PUBLIC SUPPORT

THERE WAS AN UNUSUAL GRANT IN THE FISCAL YEAR ENDED JUNE 30, 2025 IN THE AMOUNT OF \$1,000,000 RECEIVED FOR CAPITAL PURPOSES.

Multiple horizontal lines for supplemental information.

SCHEDULE D
(Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **PROJECT OF EASTON, INC.** Employer identification number **23-1699851**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$ _____

(ii) Assets included in Form 990, Part X \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$ _____

b Assets included in Form 990, Part X \$ _____

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,906,243.	1,814,901.	1,701,848.	1,988,564.	1,616,374.
b Contributions					
c Net investment earnings, gains, and losses	193,167.	164,742.	148,953.	-251,416.	405,090.
d Grants or scholarships					
e Other expenditures for facilities and programs	90,400.	73,400.	35,900.	35,300.	32,900.
f Administrative expenses					
g End of year balance	2,009,010.	1,906,243.	1,814,901.	1,701,848.	1,988,564.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment _____ %
 - b** Permanent endowment 68.0300 %
 - c** Term endowment 31.9700 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-------------------------------------|--------------------------|-------------------------------------|
| (i) Unrelated organizations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		323,514.		323,514.
b Buildings		1,716,608.	556,778.	1,159,830.
c Leasehold improvements		53,894.	53,894.	0.
d Equipment		84,768.	76,100.	8,668.
e Other		33,370.	16,685.	16,685.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				1,508,697.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) MUTUAL FUNDS	3,165,238.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	3,165,238.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: 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, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OPERATING LEASE LIABILITIES	40,344.
(3) SECURITY DEPOSITS	3,000.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	43,344.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial 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...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	3,508,837.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	153,148.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	153,148.	
3	Subtract line 2e from line 1	3	3,355,689.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	-33,893.	
c	Add lines 4a and 4b	4c	-33,893.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,321,796.	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	2,468,750.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	0.	
3	Subtract line 2e from line 1	3	2,468,750.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	-33,893.	
c	Add lines 4a and 4b	4c	-33,893.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,434,857.	

Part XIII Supplemental Information

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

PART V, LINE 4:

INCOME FROM THE ENDOWMENT FUNDS SUPPORTS OVERALL PROGRAM OPERATIONS.

PART X, LINE 2:

PROJECT OF EASTON, INC. IS A NOT-FOR-PROFIT ORGANIZATION THAT IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.

THE ACCOUNTING STANDARD FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THAT GUIDANCE, THE ORGANIZATION MAY RECOGNIZE THE TAX BENEFITS FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES BASED ON THE TECHNICAL MERITS OF THE POSITION. EXAMPLES OF TAX POSITIONS INCLUDE THE TAX-EXEMPT STATUS OF THE ORGANIZATION AND VARIOUS POSITIONS RELATED TO THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME (UBIT). THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THERE WERE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES FOR FISCAL YEAR 2025 OR 2024.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT FEES	15,288.
RENTAL EXPENSES	-49,181.

Part XIII Supplemental Information (continued)

TOTAL TO SCHEDULE D, PART XI, LINE 4B -33,893.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT FEES 15,288.

RENTAL EXPENSES -49,181.

TOTAL TO SCHEDULE D, PART XII, LINE 4B -33,893.

Multiple horizontal lines for supplemental information.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		SIMPLY SAVORY	HIGHMARK WALK	1		
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	110,902.	11,460.	5,830.	128,192.
	2	Less: Contributions	100,738.	4,855.	1,350.	106,943.
	3	Gross income (line 1 minus line 2)	10,164.	6,605.	4,480.	21,249.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	13,424.			13,424.
	7	Food and beverages	175.			175.
	8	Entertainment				
	9	Other direct expenses	7,188.	835.	4,640.	12,663.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				26,262.
11	Net income summary. Subtract line 10 from line 3, column (d)				-5,013.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **PROJECT OF EASTON, INC.** Employer identification number **23-1699851**

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FOOD, TRANSPORTATION, RENT, UTILITIES, GED SCHOLARSHIPS	5000	0.	714,420.	BOOK AND FMV	

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

PART I, LINE 2:

PROCEDURES ARE FOLLOWED AS OUTLINED IN GRANT/CONTRACT AWARDS AND BUDGETS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization: **PROJECT OF EASTON, INC.** Employer identification number: **23-1699851**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	1	10,007.	FMV
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory	X	1,884	540,838.	ESTIMATED FAIR MARKE
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (OTHER SUPPLIES)	X	22	12,979.	ESTIMATED FAIR MARKE
26	Other ()				
27	Other ()				
28	Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2024

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

Lined area for supplemental information.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)
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 instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization PROJECT OF EASTON, INC.	Employer identification number 23-1699851
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IMPROVES THE COMMUNITY AND HELPS ECONOMICALLY AND EDUCATIONALLY
DISADVANTAGED ADULTS AND CHILDREN BY ASSISTING THEM WITH THEIR
EMERGENCY NEEDS AND DEVELOPING THEIR POTENTIAL TO ACHIEVE SELF
SUFFICIENCY THROUGH THE INTEGRATED SYSTEM OF RESEARCH-BASED SOCIAL
SUPPORT AND EDUCATION PROGRAMS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EASTON, PENNSYLVANIA. TODAY, OUR EDUCATION, WORKFORCE PREPARATION, AND
SAFETY NET PROGRAMS ADDRESS THE ALARMING POVERTY AND LOW-LITERACY RATES
IN THE REGION BY PROVIDING ADULTS AND CHILDREN WITH HOLISTIC AND
INTEGRATED ACADEMIC, LIFE SKILLS, AND BASIC NEEDS PROGRAMMING THAT
HELPS THEM TO BREAK THE CYCLE OF POVERTY. OUR PROGRAMS HELP MORE THAN
5,000 PEOPLE EVERY YEAR TO RECEIVE THE SUPPORT THEY NEED TO RISE OUT OF
POVERTY AND TO SUCCEED IN SCHOOL, WORK AND LIFE. OUR CLIENTS GO ON TO
COLLEGE, JOBS AND SELF-SUFFICIENCY, READY TO PARTICIPATE IN AND IMPROVE
THEIR COMMUNITIES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
RESPONSIBILITIES AS WORKERS, CITIZENS, AND PARENTS.
GOAL: THE GOAL OF THE ADULT LITERACY PROGRAM IS TO IMPROVE ADULTS'
LITERACY SKILLS AND PREPARE THEM FOR THE WORKFORCE, POST-SECONDARY
EDUCATION OR TRAINING, AND/OR U.S. CITIZENSHIP.

2024 - 2025 RESULTS
392 STUDENTS PARTICIPATED;
82% OF STUDENTS WERE POST-TESTED;
86% MADE STATISTICALLY SIGNIFICANT LEARNING GAINS;
47 STUDENTS EARNED THEIR GENERAL EQUIVALENCY DIPLOMA (GED);
5 CHILDREN ATTAINED THEIR EARLY CHILDHOOD EDUCATION DIPLOMAS (PRE-K);
6 STUDENTS ACHIEVED U.S. CITIZENSHIP;
5 STUDENTS COMPLETED ENGLISH AS A SECOND LANGUAGE (ESL);
63 TOTAL GRADUATES

FAMILY LITERACY: PROJECT PROVIDES A FAMILY LITERACY PROGRAM THAT
RECOGNIZES THAT A PARENT'S LITERACY, ATTITUDES, AND BELIEFS TOWARD
EDUCATION SIGNIFICANTLY IMPACT THEIR CHILDREN. OUR PROGRAM BREAKS THE
INTER-GENERATIONAL CYCLE OF LOW LITERACY AND ECONOMIC DISADVANTAGE BY
PROVIDING FOUR INTEGRATED PROGRAM COMPONENTS INCLUDING:
ADULT LITERACY EDUCATION, PARENTING EDUCATION AND SUPPORT, HIGH QUALITY
PRE-SCHOOL AND STRUCTURED PARENT/CHILD LITERACY OPPORTUNITIES. THIS
"TEACH THE PARENT/REACH THE CHILD" MODEL ASSISTS PARENTS IN BECOMING
THE FIRST AND MOST IMPORTANT TEACHER OF THEIR CHILDREN AND PROMOTES THE
CHILD'S SUCCESS IN SCHOOL, WHILE ALSO ADVANCING THE PARENT'S ABILITY TO
ADVANCE EDUCATIONALLY AND ECONOMICALLY.
GOAL: THE GOAL OF THE FAMILY LITERACY PROGRAM IS TO BREAK THE
INTERGENERATIONAL CYCLE OF ILLITERACY.

2024 - 2025 RESULTS
43 FAMILIES PARTICIPATED;
57 CHILDREN PARTICIPATED IN OUR FAMILY LITERACY PROGRAM: 32 IN OUR ECE
AND 25 SCHOOL-AGED

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Name of the organization PROJECT OF EASTON, INC.	Employer identification number 23-1699851
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58% OF PARENTS MADE STATISTICALLY SIGNIFICANT LEARNING GAINS;
82% OF CHILDREN DEMONSTRATE DEVELOPMENTAL PROGRESS IN THE "KEY EXPERIENCES" OF CHILDHOOD USING THE CHILD OBSERVATION RECORD (COR) AND INFANT TODDLER CHILD OBSERVATION RECORD (IT COR)

SIZZLE! : PROJECT'S SIZZLE! THE PROGRAM ADDRESSES THE "SUMMER SLIDE" LEARNING LOSS THAT OCCURS FOR ELEMENTARY-SCHOOL-AGE CHILDREN. FOR DISADVANTAGED CHILDREN WHO MAY ALREADY HAVE A READING ACHIEVEMENT GAP, THIS "SUMMER SLIDE" CAN SIGNIFICANTLY UNDERMINE FUTURE SUCCESS IN SCHOOL. OUR PROGRAM IS A FREE SUMMER DAY CAMP FOR LOW-INCOME, AT-RISK CHILDREN IN GRADES K-5 IN THE EASTON AREA SCHOOL DISTRICT (EASD). THE GOAL OF THE SIX-WEEK PROGRAM IS TO INCREASE OR MAINTAIN READING SCORES. SIZZLE! PROVIDES CHILDREN WITH AN ACADEMIC INTERVENTION USING HIGH QUALITY, EVIDENCE-BASED READING INSTRUCTION ALIGNED WITH THE PENNSYLVANIA STATE EDUCATION STANDARDS. THE PROGRAM ALSO PROVIDES A FUN, DEVELOPMENTALLY APPROPRIATE OPPORTUNITY FOR SUMMER ACTIVITY, ENABLING ENROLLED CHILDREN TO KEEP UP WITH THEIR MORE ADVANTAGED PEERS AND BEGIN A NEW SCHOOL YEAR MORE CONFIDENTLY.
GOAL: TO PREVENT SUMMER SLIDE IN READING SKILLS BY IDENTIFYING AT-RISK STUDENTS AND PROVIDING INTENSIVE READING INSTRUCTION TO MAINTAIN OR INCREASE READING LEVELS.

2024-2025 (SIZZLE! 2024) RESULTS

ENROLLED 138 STUDENTS

45% (62/138) OF ENROLLED CHILDREN ATTENDED AT LEAST 20 DAYS (85% ATTENDANCE)

56% (35/62) OF CHILDREN WHO ATTEND AT LEAST 20 DAYS MAINTAINED OR GAINED LITERACY SKILLS USING STAR 360, DIBELS

97% (60/62) OF CHILDREN WHO ATTEND AT LEAST 20 DAYS MAINTAINED OR GAINED LITERACY SKILLS USING CURRICULUM-BASED ASSESSMENTS (CBAS)

55% (76/138) OF ENROLLED CHILDREN HAD PARENT PARTICIPATION IN AT LEAST 1 SCHEDULED FAMILY EVENT

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
FOUNDATION ON WHICH TO BUILD TOWARD SELF-RELIANCE AND UPWARD ECONOMIC MOBILITY.

2024 - 2025 RESULTS

HOUSEHOLDS SERVED: 616

1,314 PEOPLE (605 ADULTS, 499 CHILDREN, 210 SENIORS)

100% (1,314/1,314) OF HOUSEHOLDS SEEKING SERVICES RECEIVED INFORMATION AND REFERRALS TO COMMUNITY PARTNERS OR WERE REFERRED FOR EMERGENCY SERVICES THROUGH THE 211 SYSTEM

100% (1,433/1,433) OF HOUSEHOLDS WERE REFERRED TO PROJECT'S SERVICES, INCLUDING OUR FOOD PANTRY, ADULT & FAMILY LITERACY PROGRAMS, AND SCHOOL-BASED PROGRAMMING AS APPROPRIATE AS WELL AS OTHER COMMUNITY SERVICES

39% OF CLIENTS WHO RECEIVED A RENTAL AND/OR UTILITY VOUCHER REMAINED IN STABLE HOUSING AT 30/60/90 DAYS

20 CLIENTS RECEIVED RENTAL ASSISTANCE

90 SENIORS RECEIVED HEATING ASSISTANCE

24 CLIENTS RECEIVED FURNITURE ASSISTANCE

8 CLIENTS RECEIVED EYE CARE ASSISTANCE

FOOD PANTRY: PROJECT'S FOOD PANTRY IS COMMITTED TO REDUCING FOOD INSECURITY AND INCREASING HEALTHY FOOD KNOWLEDGE. OUR FOOD PANTRY,

Name of the organization PROJECT OF EASTON, INC.	Employer identification number 23-1699851
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THE LARGEST IN NORTHAMPTON COUNTY, EMPLOYS A "FULL CHOICE" MODEL, WHICH ALLOWS CLIENTS TO "SHOP" WITH DIGNITY AND CHOOSE HEALTHY OPTIONS. OUR PANTRY IS A "FOOD INTERVENTION" THAT REDUCES HUNGER, BUT ALSO ADDRESSES UNDERLYING CONDITIONS THAT RESULT IN POVERTY AND FOOD INSECURITY. OUR STAFF AND VOLUNTEERS ACTIVELY ENGAGE WITH ALL PANTRY CLIENTS AND DIRECT THEM TO SUPPORT SERVICES AS NEEDED. WE INCORPORATE LEARNING OPPORTUNITIES, INCLUDING HEALTHY FOOD PREPARATION, BUILDING DIETS RICH IN FRESH FRUITS AND VEGETABLES, AND MANAGING DIETARY RESTRICTIONS. GOAL: THE GOAL OF THE PANTRY IS TO REDUCE FOOD INSECURITY, INCREASE FOOD LITERACY, AND IDENTIFY PEOPLE WITH OTHER EMERGENCY NEEDS AND PROVIDE PARTICIPANTS WITH A PORTAL TO SUPPORTIVE SERVICES AND A "CHOICE" PANTRY MODEL.

2024-2025 RESULTS

HOUSEHOLDS SERVED: 1,344 HOUSEHOLDS
 4,558 PEOPLE (INCLUDING 2,315 ADULTS, 1,499 CHILDREN, 744 SENIORS) WERE PROVIDED FOOD TO REDUCE FOOD INSECURITY, INCREASE FOOD LITERACY AND WERE PROVIDED WITH SUPPORTIVE SERVICES IF NEEDED;
 RECEIVED 123,497 POUNDS OF FOOD CONTRIBUTIONS
 DISTRIBUTED 198,907 POUNDS OF FOOD CONTRIBUTIONS AND PURCHASES
 53 VOLUNTEERS DEDICATED 5,229 VOLUNTEER HOURS EQUIVALENT TO \$156,609 VALUE
 100% OF CLIENTS WERE PROVIDED WITH 3-4 DAYS' WORTH OF FOOD
 100% OF CLIENTS RECEIVED NEWSLETTERS AND NUTRITIONAL INFORMATION
 DISTRIBUTION: 23 TENTS, 60 SLEEPING BAGS, AND 156 BLANKETS TO HOMELESS;
 1607 BACKPACK BUDDIES TO CHILDREN; 2,130 HOMELESS DAY BAGS; 7,038 LBS OF FOOD TO CHRIST UNITED METHODIST CHURCH SOUP KITCHEN, AND 8,055 LBS OF FOOD TO PSALM346 FOR HOMELESS ENCAMPMENTS AND SHUT INS.

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

592 STUDENTS PARTICIPATED IN THE PROGRAM
 87% OF ALL STUDENTS PARTICIPATING IN LST COMPLETED 80% OF MORE OF THE CURRICULUM
 80% SHOWED GROWTH IN AT LEAST ONE OF 3 LIFE SKILL AREAS
 100% OF LST HAD AT LEAST ONE FIDELITY CHECK

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

THE DRAFT FORM 990 IS REVIEWED ON A VERY DETAILED BASIS BY MANAGEMENT. THE PUBLIC DISCLOSURE COPY OF FORM 990 WAS PROVIDED TO AND APPROVED BY THE BOARD OF DIRECTORS. SCHEDULE B WAS REVIEWED AND APPROVED BY THE BOARD TREASURER AND RECOMMENDED FOR APPROVAL TO THE FULL BOARD.

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

EACH YEAR OFFICERS, DIRECTORS AND EMPLOYEES OF THE AGENCY COMPLETE CONFLICT OF INTEREST DISCLOSURE STATEMENTS. FORMS ARE REVIEWED BY MANAGEMENT AND ADDRESSED WHEN REQUIRED.

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

THE OBJECTIVE OF PROJECT OF EASTON'S EXECUTIVE COMPENSATION POLICY IS TO PROVIDE REASONABLE AND COMPETITIVE COMPENSATION FOR THE POSITION OF THE EXECUTIVE DIRECTOR. EXECUTIVE DIRECTOR COMPENSATION WILL BE ESTABLISHED BY THE EXECUTIVE COMMITTEE AND APPROVED BY THE BOARD USING APPROPRIATE MARKET SURVEYS OF COMPARABLE ORGANIZATIONS AND FOR FUNCTIONALLY EQUIVALENT POSITIONS, IT WILL CONSIDER TOTAL COMPENSATION AND CONSIDER INDIVIDUAL

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

Department of the Treasury
Internal Revenue Service

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. PROJECT OF EASTON, INC.	Taxpayer identification number (TIN) 23-1699851
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 320 FERRY STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. EASTON, PA 18042	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08	Form 990-T (governmental entities)	15

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
Plan Number _____
Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **KIMBERLY CHECKEYE, EXECUTIVE DIRECTOR**
320 FERRY STREET - EASTON, PA 18042

Telephone No. **610-258-4361** Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15**, 20 **26**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 calendar year 20 _____ or
 tax year beginning **JUL 1**, 20 **24**, and ending **JUN 30**, 20 **25**

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.