Form **99**

Return of Organization Exempt From Income Tax

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



	Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.								
			lar year, or tax ye	ar beginning		and	dending		
	Check if pplicat	ole: C Name o	f organization					D Employer identifi	cation number
X	Addr	ess GRAY	WOLF PRES	S					
-	Name	9	ousiness as					91-12572	37
	Initial returr	Number	r and street (or P.0	. box if mail is	not delivered to str	reet address)	Room/suite	E Telephone numbe	r
	Final		THIRD AVE	NUE N			485	651-641-	
	termi ated Amer	,	town, state or prov IEAPOLIS ,			ign postal code		G Gross receipts \$	4,473,816.
	eturn								
	Appli tion pend	F Name a	and address of prin		CARMEN SI	MITH		for subordinates	
		SAME	AS C ABOV					H(b) Are all subordinates ir	
		empt status: [<u> </u>	501(c) () (insert	no.) 4947(a)(1)	or 527	- ''	list. See instructions
	Nebs		X Corporation	Trust	Association	Other	L Voor	H(c) Group exemption	n number I State of legal domicile: MN
	art I	Summary		TTUSI	Association	Otild			A State of legal domicile, FIIN
	1	-		's mission or	most significant	activities: GRAY	WOLF F	RESS IS DED	ICATED TO
ce	.							TEMPORARY LI	
Governance	2	Check this bo						e than 25% of its net as	
ver	3		ting members of th	-				3	20
	4		-		• •	dy (Part VI, line 1b)			23
s S	5					Part V, line 2a)			27
/itie	6								20
Activities &	7 a		d business revenu					7a	0.
	b	Net unrelated	business taxable	income from l	Form 990-T, Part	t I, line 11	<u></u>	7b	0.
								Prior Year	Current Year
e	8	Contributions	and grants (Part \	/III, line 1h)				1,316,718.	895,625.
enu	9	•	ice revenue (Part \					299,846.	255,129.
Revenue	10							33,678.	40,247.
ш	11	Other revenue	e (Part VIII, column	(A), lines 5, 6	id, 8c, 9c, 10c, a	and 11e)		2,584,287.	2,185,813.
	12					olumn (A), line 12)		4,234,529.	3,376,814.
	13					3)		6,850.	4,654.
	14		to or for members						
es	15					umn (A), lines 5-10)		1,611,525.	1,735,959.
Expenses	16a					373,4	ол —	0.	0.
ц. В	b d		ing expenses (Par					2,596,327.	2,338,488.
						(A) line OF)		4,214,702.	4,079,101.
	18					(A), line 25)		19,827.	-702,287.
- 2	19	Revenue less	expenses. Subtra					eginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)					6,471,480.	6,102,830.
ASSE	20		s (Part X, line 10)	793,769.	1,334,643.				
Net ,	22			btract line 21	from line 20		·····	5,677,711.	4,768,187.
	art II							-,	_,,_0,0
		- 112	1. d l	examined this r	eturn, including ad	companying schedule	es and statem	ents, and to the best of my	knowledge and belief, it is
true	, corre	 ct, and complete	. Declaration of prep	arer (other thar	officer) is based of	on all information of w	hich prepare	ents, and to the best of my has any knowledge. 6/12/2023	,
		Lakome In S	mitly	,	,			<u>6/1272023</u>	

	IM MCM SMILL											
Sign 🖵	Signaty Booto afficer											
Here	lere CARMEN SMITH, DIRECTOR/PUBLISHER											
	Type or print name and title											
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN								
Paid	RACHEL FLANDERS	RACHEL FLANDERS	06/09/23	self-employed P01591790								
Preparer	Firm's name CLIFTONLARSONALLE	N, LLP	Firm's	EIN 41-0746749								
Use Only	Firm's address 220 SOUTH SIXTH S	TREET, SUITE 300										
	MINNEAPOLIS, MN 5	5402	Phone	no.612-376-4500								
May the I	RS discuss this return with the preparer shown abo	ove? See instructions		X Yes No								
				000								

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

Form 990 (2022)

Form	990 (2022) GRAYWOLF PRESS	91-1257237	Page 2
Pa	rt 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:		
	GRAYWOLF PRESS IS A LEADING INDEPENDENT PUBLISHER CO		
	DISCOVERY AND ENERGETIC PUBLICATION OF TWENTY-FIRST (CENTURY AMERICAN	
	AND INTERNATIONAL LITERATURE. WE CHAMPION OUTSTANDING		
	STAGES OF THEIR CAREERS TO ENSURE THAT ADVENTUROUS R		
2	Did the organization undertake any significant program services during the year which were not listed on		
	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 ser	vices? Yes [XNo
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service		
	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	ł
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$794,494. including grants of \$4,654.		29 .)
	EDITORIAL SERVICES. GRAYWOLF EDITORS CONTINUE TO SEE		
	THAT IS ENGAGED WITH CONTEMPORARY ISSUES OF OUR TIME	-	
	VOICES, STORIES, AND GENRES THAT ARE UNDERREPRESENTED		
	PUBLISHING. EDITORS ACQUIRED 24 NEW MANUSCRIPTS IN 2		
	GRATIFIED BY AWARDS THAT DEMONSTRATE THE EXCELLENCE (
	PROGRAM. IN 2022, FRANK: SONNETS BY DIANE SUESS WON		
	FOR POETRY, AND MAI DER VANG'S YELLOW RAIN WAS A FIN		
	PRIZE. PERCIVAL EVERETT'S THE TREES WAS A FINALIST FO		
	AND THE RUPTURE TENSE BY JENNY XIE WAS A FINALIST FO		OK
	AWARD FOR POETRY. IF AN EGYPTIAN CANNOT SPEAK ENGLIS	H WON THE CENTER	
	FOR FICTION FIRST NOVEL PRIZE.		
	1 511 240	0 100 0	0.5
4b) (Revenue \$ 2,186,2	
	PRODUCTION. IN 2022, GRAYWOLF PUBLISHED 32 TITLES FE		
	38 AUTHORS AND TRANSLATORS. WE REACHED ABOUT 660,000		. <u> </u>
	640 TITLES IN PRINT. GRAYWOLF RELEASES SIMULTANEOUS		37
	EDITIONS, AND OUR BOOKS ARE AVAILABLE IN BOOKSTORES		
	AS WELL AS ONLINE. RELATIONSHIPS WITH PUBLIC LIBRARI		i
	OF DONATING OUR BOOKS TO PRISONS AND COMMUNITY ORGAN		
	ENSURE THAT OUR BOOKS REACH A WIDE AUDIENCE. GRAYWOLD		ED
	ON ACID-FREE PAPER AND ARE BUILT TO LAST. WE USE REC	ICLED PAPER	
	WHENEVER POSSIBLE.		
4	(Code:) (Expenses \$984,092. including grants of \$		
4c	(Code:) (Expenses \$984,092. including grants of \$ PROMOTION AND MARKETING SERVICES. GRAYWOLF PLAYS A CI) (Revenue \$ RIICTAL, ROLF IN)
	ADVANCING OUR WRITERS' PROFESSIONAL CAREERS BY PROVID		
	PUBLICITY AND MARKETING. WE ARE COMMITTED TO FINDING		1
	FOR EACH PUBLICATION. OUR AUTHORS PARTICIPATED IN OVI		
	IN-PERSON EVENTS IN 2022. IN 2022, OUR BOOKS RECEIVE		<u> </u>
	MEDIA HITS, INCLUDING FIFTEEN REVIEWS IN THE NEW YOU		
	YORK TIMES BOOK REVIEW, SEVEN REVIEWS IN THE NEW YOR		
	REVIEWS IN THE WASHINGTON POST.		
- A ~4	Other program convices (Describe on Schedule O)		
40	Other program services (Describe on Schedule O.)	١	
4-	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 3,289,926.)	
40	Total program service expenses 3,289,926.	Form 99	0 (2022)
222004	2 12-13-22		- (2022)
202004	3		
	-		

Form	990 (2022) GRAYWOLF PRESS 91-125	7237	Р	age 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		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? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? 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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	<u> </u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		77	
	Schedule D, Parts XI and XII	12a	X	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	10		- v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			X X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	1		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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			
		146		x
15	or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15	foreign organization? If "Yes," complete Schedule F, Parts II 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	15		
10		16		x
17	or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<u> </u>
.,	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 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		<u> </u>
.0	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			<u> </u>
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		1	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	0.00	1	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		1	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		x
232003	3 12-13-22		990	(2022)

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	990 (2022) GRAYWOLF PRESS 91-125	7237	P	_{age} 4
Pa	TIV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	22		
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
h	transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		<u> </u>
U	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? <i>If</i>	00-		x
h	"Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	200		- 23
U	"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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
~ ~	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	34		x
35 a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		<u> </u>
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	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?			
Pa	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	<u>i </u>
1 a	Check if Schedule O contains a response or note to any line in this Part V			
	טוופטת זו סטוופטעוב ט טטווגמוזס מ ובסטטוסב טו ווטנפ נט מוזץ וווזפ ווו נוזוס דמוג ע		Yes	No
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable)	103	
		5		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
232004	\$ 12-13-22	Form	990	(2022)

Form	990 (2022) GRAYWOLF PRESS 91-12572	237	P	_{age} 5
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 27			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
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).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
	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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
~	organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
.5	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.	.0		
16	le the exemization on educational institution subject to the section 4000 evolution and investment income?	16		х
10	If "Yes," complete Form 4720, Schedule O.	10		
17				
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.	Form	900	(2022)
232005	12-13-22	rorm	330	(2022)

Form	990 (2022) GRAYWOLF PRESS		91-1257			age 6
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	rough	7b below, and for a	"No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.				•	
	Check if Schedule O contains a response or note to any line in this Part VI					X
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	20		100	110
iu	If there are material differences in voting rights among members of the governing body, or if the governing	14		-		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
h	Enter the number of voting members included on line 1a, above, who are independent	1b	23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			-		
2				2		х
~	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the			2		<u></u>
3						v
			- Cl - 10	3		X X
4	Did the organization make any significant changes to its governing documents since the prior Form 99			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asso	ets?		5		X
6	Did the organization have members or stockholders?			6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	coint o	one or			37
	more members of the governing body?			<u>7a</u>		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ockho	ders, or			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		-			
	The governing body?			<u>8a</u>	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	<u>enue</u>	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha	apters	, 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	befor	e filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conf	licts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," de	escribe			
	on Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approval	by ind	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
	Other officers or key employees of the organization			15b	Х	
	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 arrangem	ent w	ith a			
	taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi	-	-			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filedMN , NY , CA					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	d 990	T (section 501(c)(3)	s only)	availat	ole
10	for public inspection. Indicate how you made these available. Check all that apply.	u 000		5 Orny)	avanak	510
	X Own website Another's website X Upon request Other (explain	on So	hadula ()			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con		,	d finan	tial	
	statements available to the public during the tax year.		and the second policy, and			
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	l records			
20	CARMEN SMITH - (651)641-0077					
	212 THIRD AVENUE NORTH, SUITE 485, MINNEAPOLIS, MN	55	401			
222000				Form	990	(2022)
202000	7			1011		(LULL)
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Form 990 (2022) GRAYWOLF PRESS	91-1257237	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	ompensated	
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 List all of the organization's current officers, directors, trustees (whether individuals or organizations), rec 	8	,

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.

Name and title	Average hours per week (list any hours for related organizations below line) 40.00	stee or director	not cl , unles	ss per	more rson i irecto	than o s both pr/trus	n an	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
	week (list any hours for related organizations below line)	box offic	, unles cer an	ss per	rson i irecto	s both pr/trus	n an	from the	from related	other
	(list any hours for related organizations below line)			id a d			tee)	the		
	hours for related organizations below line)	Individual trustee or directo	tutional trustee						organizations	compensation
	related organizations below line)	Individual trustee or di	tutional trustee							
	organizations below line)	Individual trustee	tutional trust			ated		organization	(W-2/1099-MISC/	from the
	below line)	Individual tr	tutional		96	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	line)	Individ	E		voldu	t con	-	1099-NEC)		organizations
	40.00		nstii	Officer	Key employee	Highest compensated employee	Former			organizations
(1) KATHARINE FISCHBACH			_			1 2 0				
ASSOCIATE PUBLISHER		1		x				109,874.	0.	4,377.
(2) FIONA MCCRAE	40.00									-
EXECUTIVE DIRECTOR (JANUARY-JULY)				Х				68,600.	0.	28,759.
(3) CARMEN SMITH	40.00									
EXECUTIVE DIRECTOR (AUGUST-DECEMBER)				Х				68,692.	0.	4,331.
(4) CATHY POLASKY	2.00									
CHAIR		Х		Х				0.	0.	0.
(5) MILO CUMARANATUNGE	2.00									
SECRETARY		Х		Х				0.	0.	0.
(6) JILL KOOSMANN	2.00									
TREASURER		Х		Х				0.	0.	0.
(7) ART BERMAN	2.00									
DIRECTOR		Х						0.	0.	0.
(8) KARIN BIRKELAND	2.00									
DIRECTOR		Х						0.	0.	0.
(9) KATHLEEN BOE	2.00									
DIRECTOR		Х						0.	0.	0.
(10) BRIAN CHILDS	2.00									
DIRECTOR		Х						0.	0.	0.
(11) MICHELLE KEELEY	2.00									
DIRECTOR		Х						0.	0.	0.
(12) CHRIS KIRWAN	2.00									
DIRECTOR		Х						0.	0.	0.
(13) AIMEE LAGOS	2.00									•
DIRECTOR		Х						0.	0.	0.
(14) MAURA RAINEY MCCORMACK	2.00									-
DIRECTOR		Х						0.	0.	0.
(15) ZACHARY MCMILLAN	2.00									•
DIRECTOR		X						0.	0.	0.
(16) SHARON PIERCE	2.00								•	•
DIRECTOR		X						0.	0.	0.
(17) SHAHINA PIYARALI	2.00								•	•
DIRECTOR 232007 12-13-22		Х						0.	0.	0. Form 990 (2022)

8

232007 12-13-22

Form 990 (2022)

Form 990 (2022) GRAYWOLF									91-12	257	237 Page 8
Section A. Onicers, Directors, Hustees, Key Linployees, and Highest Compensated Linployees (continued)											
(A) (B) (C) (D) (E)											(F)
Name and title	Average		not cł	heck	more	than c		Reportable	Reportable		Estimated
	hours per week	box offi	, unles cer an	ss per d a d	rson i irecto	s both pr/trust	an ee)	compensation	compensatio		amount of
	(list any						,	_ from the	from related		other
	hours for	direct				-		organization	organizations (W-2/1099-MIS		compensation from the
	related	e or	stee			Isated		(W-2/1099-MISC/	1099-NEC)		organization
	organizations	truste	al tru		yee	im pei		1099-NEC)			and related
	below	Individual trustee or director	Institutional trustee	5	Key employee	est cc oyee	er	,			organizations
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Former				-
(18) JAMES SHORT	2.00										
DIRECTOR		Х						0.		0.	0.
(19) WINIFRED SMITH	2.00										
DIRECTOR		X						0.		0.	0.
(20) DEBRA STONE	2.00										
VICE CHAIR		х		х				0.		0.	0.
(21) MIKE MEYER	2.00										
DIRECTOR		x						0.		0.	0.
(22) RAMONA ADVANI	2.00										
DIRECTOR		x						0.		0.	0.
(23) KATHLEEN SMITH	2.00									-	
DIRECTOR		x		х				0.		0.	0.
										-	
		i									
		1									
1b Subtotal								247,166.		0.	37,467.
c Total from continuation sheets to Part VI								0.		0.	0.
d Total (add lines 1b and 1c)								247,166.		0.	37,467.
2 Total number of individuals (including but no									000 of reportable		• • • • • •
compensation from the organization		000	noto	u un		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					1
compensation nom the organization											Yes No
3 Did the organization list any former officer,	director trust	ا مم		mnl		e or	hio	hest compensated emp	lovee on		
c			-	•	-			, , ,			3 X
line 1a? If "Yes," complete Schedule J for stFor any individual listed on line 1a, is the su											3 11
and related organizations greater than \$150											4 X
5 Did any person listed on line 1a receive or a											
rendered to the organization? If "Yes." com											5 X
Section B. Independent Contractors		3 J 10	or su		Jers	011 .					5 11
1 Complete this table for your five highest cor	monopoted ind	lono	ndor		ontro	antor	o +k	hat reacived more than (100 000 of comp	onoot	ion from
the organization. Report compensation for t	-	-								1501	
(A)	ne calendar ye	sai e	nuin	iy w	iun c			(B)			(C)
(A) Name and business	address							(D) Description of s	ervices	С	ompensation
BOOKMOBILE							_				
	POLIS,	мм	5	51	1 8			PRODUCTION O	FBOOKS		842,898.
ANDERSON CC		LIIN	<u> </u>	5 -	10		_	INODUCIION O	E BOOKS		042,090.
5280 W 74TH ST., EDINA, M	N 55/39							CONSTRUCTION			234,725.
<u>5200 W /4111 51., EDINA, M</u>	N 33433						_	CONDINCTION			234,123.
							_				
							_				
2 Total number of independent contractors (ir		ot lin	nitod	l to i	thoo			above) who received m	ore than		
\$100,000 of compensation from the organiz	•	51 M		0	2						

\$100,000 of compensation from the organization

Form **990** (2022)

232008 12-13-22

			2022) GRAYWOLF PRE	SS				91-1257	237 Page 9
Pa	rt V	/111							
			Check if Schedule O contains a respons	se or note	e to any lin		(5)		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ស ស	1	а	Federated campaigns 1a						
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b						
, Gi			Fundraising events 1c						
àifts ar A			Related organizations 1d						
s, G mili			Government grants (contributions) 1e	2	37,265.				
r Si		f	All other contributions, gifts, grants, and						
but			similar amounts not included above 1f	6	58,360.				
d O		g	Noncash contributions included in lines 1a-1f						
an Co		h	Total. Add lines 1a-1f	<u></u>		895,625.			
					ess Code				
е	2	а	RIGHTS REVENUE	513	130	255,129.	255,129.		
ervi		b							
n Se enu		С		_					
Program Service Revenue		d		_					
roç		е		_					
а.			All other program service revenue			255,129.			
	3	g	Total. Add lines 2a-2f Investment income (including dividends, inter			255,125.			
	3					39,855.			39,855.
	4		other similar amounts) Income from investment of tax-exempt bond						
	5		Royalties						
	Ū		(i) Real		Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of (i) Securities		Other				
			assets other than inventory 7a 266, 493	3.					
		b	Less: cost or other basis						
anı			and sales expenses						
evenue		С	Gain or (loss) 7c 392	2.					
Ě			Net gain or (loss)	<u></u>		392.	392.		
Other	8	а	Gross income from fundraising events (not including \$ of						
			contributions reported on line 1c). See						
			· · · · · · · · · · · · · · · · · · ·	Ba					
				Bb					
			Net income or (loss) from fundraising events	,					
	э	d	Gross income from gaming activities. See	9a					
		h	· · · · · · · · · · · · · · · · · · ·	9b					
			Net income or (loss) from gaming activities						
			Gross sales of inventory, less returns						
		-		0a 3,0	16,714.				
		b			30,901.				
			Net income or (loss) from sales of inventory		<u>.</u>	2,185,813.	2,185,813.		
"					ess Code				
Miscellaneous Revenue	11	а							
ane		b							
cell Seve		С		_					
Mis			All other revenue						
		е	Total. Add lines 11a-11d			2 276 011	0 444 224		20.055
	12	4-	Total revenue. See instructions			3,376,814.	2,441,334.	0.	39,855. Form 990 (2022)
23200	9 12-	-13-	22						FULLI 330 (2022)

Form 990 (2022) GRAYWOLF PRESS 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 respons			<u>,</u> ()	
		(A)		(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		скрепаса	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
2	individuals. See Part IV, line 22	4,654.	4,654.		
3	Grants and other assistance to foreign	1,0010	1,0010		
5	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,				
5	trustees, and key employees	170,382.	98,822.	30,669.	40,891.
6	Compensation not included above to disqualified	1/0,502.	50,022.	50,005.	40,001.
0	persons (as defined under section 4958(f)(1)) and				
7	Other salaries and wages	1,230,607.	946,295.	139,435.	144,877.
7	_	1,230,007.	J40,2JJ•	137,433.	144,0774
8	Pension plan accruals and contributions (include	47 923	36,346.	5,608.	5 969
~	section 401(k) and 403(b) employer contributions)	47,923. 187,369.	144,366.	22,248.	5,969. 20,755.
9	Other employee benefits	99,678.	74,759.	11,961.	12,958.
10	Payroll taxes	<i></i>	14,153.	<u> </u>	14,930.
11	Fees for services (nonemployees):				
a		8,058.		8,058.	
b	F	49,435.		49,435.	
	Accounting	49,433.		49,435.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	3				
g		155,938.	69,105.	58,651.	28 182
	column (A), amount, list line 11g expenses on Sch 0.)	87,750.	87,750.	50,051.	28,182.
12	Advertising and promotion	113,150.	69,953.	16,677.	26 520
13	Office expenses				26,520. 13,173.
14	Information technology	92,649. 753,512.	72,634.	6,842.	13,1/3.
15	Royalties	<u> </u>	753,512.	7 110	7 705
16		59,268.	44,451.	7,112.	7,705. 8,999.
17		42,863.	26,734.	7,130.	8,999.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	E0 200	01 207	4 016	22 695
19	Conferences, conventions, and meetings	58,288.	21,387.	4,216.	32,685.
20					
21	Payments to affiliates	20 400		1 720	E 10F
22	Depreciation, depletion, and amortization	39,428.	29,571.	<u>4,732</u> . 40,736.	5,125.
23	Insurance	40,736.		40,736.	
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 0.)	700 004	700 004		
а	DISTRIBUTION FEES	702,884.	702,884.	0.	15 270
b	AUTHOR TOURS	67,971.	50,411.	2,181.	15,379.
С	GALLEYS	25,335.	21,705.	0.	3,630.
d	PROMOTION EXPENSES	23,627.	23,627.	0.	0.
	All other expenses	17,596.	10,960.		6,636.
25	Total functional expenses. Add lines 1 through 24e	4,079,101.	3,289,926.	415,691.	373,484.
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 if following SOP 98-2 (ASC 958-720)				- 000
23201	0 12-13-22	11			Form 990 (2022)

art X	Balance Sheet					
	Check if Schedule O contains a response or note	to any line	e in this Part X			
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			1,939,464.	1	1,280,350
2			2			
3	Savings and temporary cash investments Pledges and grants receivable, net			445,965.	3	198,79
4	Accounts receivable, net			708,410.	4	726,36
5	Loans and other receivables from any current or f		-	- 1		
	trustee, key employee, creator or founder, substantial contributor, or 35%					
	controlled entity or family member of any of these		5			
6	Loans and other receivables from other disqualifie		s (as defined			
	under section 4958(f)(1)), and persons described				6	
, 7	Notes and loans receivable, net				7	
8 8	Inventories for sale or use			600,709.	8	728,61
ế 9				100,244.	9	51,78
	Land, buildings, and equipment: cost or other					
		10a	736,667.			
		10b	368,195.	115,130.	10c	368.47
11	Investments - publicly traded securities			2,054,723.	11	<u> </u>
12	Investments - other securities. See Part IV, line 11	2,001,1200	12			
13	Investments - program-related. See Part IV, line 1				13	
14	Investments - program-related. See Part IV, line 11 Intangible assets				14	
15	Other assets. See Part IV, line 11			506,835.	15	866,30
16	Total assets. Add lines 1 through 15 (must equa			6,471,480.	16	6,102,83
17	Accounts payable and accrued expenses			141,063.	17	153,35
18	Grants payable				18	
19	Deferred revenue			259,626.	19	189,43
20				2007/0201	20	200710
21	Escrow or custodial account liability. Complete P		.		21	
	Loans and other payables to any current or forme				21	
	trustee, key employee, creator or founder, substa					
	controlled entity or family member of any of these				22	
23	Secured mortgages and notes payable to unrelat		ution		23	
23	Unsecured notes and loans payable to unrelated	-			23	
25	Other liabilities (including federal income tax, pay				24	
25	parties, and other liabilities not included on lines					
				393,080.	25	991,85
26	of Schedule D Total liabilities. Add lines 17 through 25			793,769.	26	1,334,64
20	Organizations that follow FASB ASC 958, check		X	155,105.	20	1,551,01
3	and complete lines 27, 28, 32, and 33.	K Here				
27				5,006,731.	27	4,403,90
28	Net assets with donor restrictions			670,980.	28	364,28
20	Organizations that do not follow FASB ASC 95			010,000.	20	504,20
3	and complete lines 29 through 33.	o, check f				
5 00					20	
29	Capital stock or trust principal, or current funds				29	
30	Paid-in or capital surplus, or land, building, or equ				30	
27 28 29 29 30 30 31 32	Retained earnings, endowment, accumulated inc			5,677,711.	31	1 760 10
2 32	Total net assets or fund balances			6,471,480.	32	4,768,18

Form **990** (2022)

Form	990 (2022) GRAYWOLF PRESS	91-1	257237	Pag	_{ge} 12
Pa	rt 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	3,376		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,079		
3	Revenue less expenses. Subtract line 2 from line 1	3	-702		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,677	<mark>,7</mark> 1	11.
5	Net unrealized gains (losses) on investments	5	-207	, 23	37.
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	4,768	,18	87.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	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	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	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:				
	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	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule 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?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

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SCHEDULE	A	Dublic Cho	rity Status an		slia Qu	innort		OMB No. 1545-0047		
(Form 990)		Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section						つりつつ		
			47(a)(1) nonexempt cha			or a section		ZUZZ		
Department of the Trea			ttach to Form 990 or Fo					Open to Public		
Internal Revenue Servi		Go to www.irs.gov/	Form990 for instruction	ns and the	e latest inf	ormation.		Inspection		
Name of the org								identification number		
Dout L Do		WOLF PRESS	/					1-1257237		
			(All organizations must c			ee instruction	S.			
Ē.	•		For lines 1 through 12, c	-						
			on of churches described		on 170(b)('	I)(A)(I).				
			Attach Schedule E (Forn		V6V1VAVii	::)				
			anization described in s on njunction with a hospital			-	(iiii) Enter	the hospital's name		
	nd state:			described	Section			the hoopital o hame,		
		for the benefit of a co	llege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in		
	on 170(b)(1)(A)(iv).(5 ,		, ,					
			nental unit described in	section 17	70(b)(1)(A)	(v).				
	· · · · -	-	ntial part of its support fi				ne general j	oublic described in		
section	on 170(b)(1)(A)(vi). (0	Complete Part II.)								
8 🗌 A con	munity trust describ	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)						
9 🗌 An ag	ricultural research or	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college		
or uni	versity or a non-land-	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	e or		
unive										
			than 33 1/3% of its supp							
			t to certain exceptions;					-		
			(less section 511 tax) fro	om busines	sses acqui	red by the org	janization a	after June 30, 1975.		
	ection 509(a)(2). (Co		walk to toot for public oo	fativ Caa	ocation Fl	O(a)(4)				
		-	ively to test for public sa ively for the benefit of, to	•			rny out the	purposes of one or		
		-	ed in section 509(a)(1)				•			
		-	f supporting organization							
	-	• •	upervised, or controlled				-	aivina		
			-	•	-					
	•		the power to regularly appoint or elect a majority of the directors or trustees of the supporting olete Part IV, Sections A and B.							
ь 🗌 Тур	e II. A supporting or	ganization supervised	l or controlled in connect	tion with it	s supporte	ed organizatio	n(s), by hav	ving		
con	trol or management	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported		
org	anization(s). You mu	st complete Part IV,	Sections A and C.							
с 🗌 Тур	e III functionally inte	egrated. A supportin	g organization operated	in connec ⁻	tion with, a	and functiona	ly integrate	ed with,		
its s	upported organizatio	on(s) (see instructions). You must complete I	Part IV, Se	ections A,	D, and E.				
			porting organization oper				•	. ,		
		v	zation generally must sat	•		•	an attentiv	/eness		
·	,	,	nplete Part IV, Sections	,						
			written determination fro			Type I, Type	II, Type III			
	umber of supported		nally integrated supporti							
		on about the supporte	ad organization(s)							
	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the org	anization listed ing document?	(v) Amount o	fmonetary	(vi) Amount of other		
org	anization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	nstructions)	support (see instructions)		
T . 4 . 1										
Total										

		RAYWOLF P				91-125	
Pa	art II Support Schedule for	-		•			•
	(Complete only if you checke			•	n failed to qualify u	nder Part III. If the	organization
	fails to qualify under the tests	s listed below, plea	se complete Part I	II.)			
Se	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.")	2218830.	1380275.	1319101.	1316718.	895,625.	7130549.
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						
4	Total. Add lines 1 through 3	2218830.	1380275.	1319101.	1316718.	895,625.	7130549.
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)						1798251.
6	Public support. Subtract line 5 from line 4.						5332298.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	2218830.	1380275.	1319101.	1316718.	895,625.	7130549.
8	Gross income from interest,					-	
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	7,617.	28,250.	21,589.	62,447.	40,247.	160,150.
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.)						
11	Total support. Add lines 7 through 10						7290699.
	Gross receipts from related activities,	etc. (see instruction	ons)			12 19	,948,650.
13	First 5 years. If the Form 990 is for th		,				
	organization, check this box and stop						
Se	ction C. Computation of Publi						
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	73.14 %
15	Public support percentage from 2021					15	75.04 %
16a	a 33 1/3% support test - 2022. If the o					ore, check this bo	
	stop here. The organization qualifies						
k	33 1/3% support test - 2021. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	-		
Ł	0 10% -facts-and-circumstances test	-		• • • •	-		
	more, and if the organization meets th	-					
	organization meets the facts-and-circi				• •		
18	Private foundation If the organization		•				

232022 12-09-22

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.)

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Sec	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.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization'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						
	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 Sec	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
	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 th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organiz	ation,
	check this box and stop here	<u></u>					
Sec	ction C. Computation of Publi	ic Support Per	centage				
15	Public support percentage for 2022 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
<u>16</u>			-			16	%
Sec	ction D. Computation of Inves						
17	Investment income percentage for 20	322 (line 10c, colur	mn (f), divided by I	line 13, column (f))		17	%
18	Investment income percentage from					18	%
19a	33 1/3% support tests - 2022. If the	-					e 17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						on
20	Private foundation. If the organization	on did not check a	box on line 14, 19	9a, or 19b, check t	his box and see ins		
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Yes No

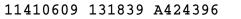
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

232024 12-09-22



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1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b Schedule A (Form 990) 2022

Schedule A (Form 990) 2022	GRAYWOLF PRESS	91-12572	37 P.	aqe 5
Part IV Supporting Organiza			<u> </u>	uge e
			Yes	No
11 Has the organization accepted a g	ift or contribution from any of the following persons?			
a A person who directly or indirectly	controls, either alone or together with persons described	on lines 11b and		
11c below, the governing body of	a supported organization?	11a		
b A family member of a person desc	ribed on line 11a above?	11b		
c A 35% controlled entity of a perso	n described on line 11a or 11b above? If "Yes" to line 11a	a, 11b, or 11c, provide		
<i>detail in</i> Part VI.		11c		
Section B. Type I Supporting C	rganizations			
			Yes	No
more supported organizations hav directors, or trustees at all times d effectively operated, supervised, o organization, describe how the po	of the governing body, officers acting in their official capa e the power to regularly appoint or elect at least a majority uring the tax year? If "No," describe in Part VI how the su controlled the organization's activities. If the organization vers to appoint and/or remove officers, directors, or truste conditions or restrictions, if any, applied to such powers d	y of the organization's officers, upported organization(s) had more than one supported ses were allocated among the		
	e benefit of any supported organization other than the su	0		
0	ervised, or controlled the supporting organization? If "Yes	••		
	t carried out the purposes of the supported organization(s)	-, -, -, -,		
supervised, or controlled the supp		2		
Section C. Type II Supporting	Drganizations	_		
			Yes	No
1 Were a majority of the organization	n's directors or trustees during the tax year also a majority	of the directors		
	tion's supported organization(s)? If "No." describe in Par			

Soot	ion D'All Type III Supporting Organizations
	the supported organization(s).
	or management of the supporting organization was vested in the same persons that controlled or managed

Section D. An Type in Supporting Organizations									
1	Did the organization provide to each of its supported organizations, by the last day of								

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

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method	d that the organization used	d to satisfy the Integral Part	t Test during the vear	(see instructions)
•	Check the DOX heat to the method	<i>inal line organization use</i>			1000 1100 000

a The organization satisfied the Activities Test. Complete line 2 below.

b		The organization	is the parent of	of each of its	supported of	organizations.	Complete line 3 be	elow.
---	--	------------------	------------------	----------------	--------------	----------------	--------------------	-------

С		The organization supported a governmental entity	Describe in Part VI how you supported a gov	ernmental entity (see instruction <u>s).</u>
---	--	--	---	--

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- **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.*

2a ______ 2b _____ 3a _____ 3b _____ Schedule A (Form 990) 2022

Yes No

Yes No

232025 12-09-22

che	dule A (Form 990) 2022 GRAYWOLF PRESS			91-1257237 Pag
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supportir	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instruction
	All other Type III non-functionally integrated supporting organizations mus	t complete S	Sections A through E.	
Sect	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on 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	Ilv integrated		nization (see

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

Schedule A (Form 990) 2022

232026 12-09-22

Sche Par	dule A (Form 990) 2022 GRAYWOLF PRES:		nizations (continue		1-1257237 Page 7
	on D - Distributions	<u></u>		<i>;u)</i>	Current Year
1	Amounts paid to supported organizations to accomplish exer	mot nurnoses		1	Ourrent real
2	Amounts paid to perform activity that directly furthers exemp			·	
-	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations		3	
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro		5		
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which th	e organization is responsive			
	(provide details in Part VI). See instructions.	0		8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	;	(iii) Distributable Amount for 2022
_1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$			_	
a	Applied to underdistributions of prior years			_	
b	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.			_	
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
-					

Schedule A	(Form 990) 2022	GRAYWOLF PRES	S	91-1257237	Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, lines 2 and 3; Part IV, Sectio	9b, 9c, 11a, 11b, and 11c; Par on E, lines 1c, 2a, 2b, 3a, and 3	10; Part II, line 17a or 17b; Part III, line 12; t IV, Section B, lines 1 and 2; Part IV, Section b; Part V, line 1; Part V, Section B, line 1e; Pa	n C,
	Section D, lines 5, 6, and (See instructions.)	8; and Part V, Section E, line	es 2, 5, and 6. Also complete th	his part for any additional information.	
232028 12-09-2	2		21	Schedule A (Form	990) 2022
			<u>4</u> T		

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Schedule B

(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. OMB No. 1545-0047

2022

Employer identification number

91-1257237

Drganization type (check one):					
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.

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, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set in the set is organization because it received *nonexclusively* set is the set is organization because it received *nonexclusively* set is the set is organization because it received *nonexclusively* set is the set is organization because it received *nonexclusively* set is the set is the

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.

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Schedule B (Form 990) (2022)

Name of organization

Page **2**

GRAYWOLF PRESS

Employer identification number

91-1257237

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions \$ 177,265.	Type of contribution Person X Payroll
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions \$ 100,000.	Type of contribution Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	, , ,	\$60,300.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_		\$60,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>56,920.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

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Schedule B (Form 990) (2022)

Name of organization

Page **2**

GRAYWOLF PRESS

Employer identification number

91-1257237

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 contributions	(d) Type of contribution
7		- _ \$50,000. -	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8_		\$23,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9_		\$ <u></u> 20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	, , , , , , , , , , , , , , , ,	- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)

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223452 11-15-22

	3 (Form 990) (2022)		Page 3
Name of or	ganization		Employer identification number
GRAYWO	DLF PRESS		91-1257237
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed	l.
(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.	
		\$	

16190609 131839 A424396

Schedule B (Form 990) (2022)

Schedule I	B (Form 990) (2022)		Page 4					
Name of o	rganization		Employer identification number					
GRAYW	OLF PRESS		91-1257237					
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a)	through (e) and the following line entry charitable, etc., contributions of \$1,000 or les	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gift						
	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 gift							
	Transferee's name, address, and 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 gift							
·	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 gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					

Schedule B (Form 990) (2022)

SCHEDULE C	Polit	ical Campaign	and Lobbyin	ng Activities	OMB No. 1545-0047
(Form 990)	501(c) and section 527 Form 990 or Form 990-EZ	Open to Public Inspection			
nternal Revenue Service		www.irs.gov/Form990 for			•
-		r m 990, Part IV, line 3, or F e Parts I-A and B. Do not co		ne 46 (Political Campaign	Activities), then
	•	(3)) organizations: Complete		. Do not complete Part I-B.	
 Section 527 organiza 		(
•		rm 990, Part IV, line 4, or F	orm 990-EZ, Part VI, I	ine 47 (Lobbying Activitie	s), then
 Section 501(c)(3) org 	anizations that have	filed Form 5768 (election ι	Inder section 501(h)): C	omplete Part II-A. Do not c	omplete Part II-B.
		NOT filed Form 5768 (elec	•	<i>,,</i> ,	•
-		rm 990, Part IV, line 5 (Pro	xy Tax) (See separate	instructions) or Form 990	-EZ, Part V, line 35c (Proxy
 Section 501(c)(4), (5) 		· Complete Part III			
Vame of organization	, or (o) organizations			Fm	ployer identification numbe
	GRAYWOLF	PRESS			91-1257237
Part I-A Comple		zation is exempt und	ler section 501(c)	or is a section 527 o	
1 Provide a description	on of the organizatior	n's direct and indirect politi	cal campaign activities	in Part IV.	
2 Political campaign a	activity expenditures				\$
3 Volunteer hours for	political campaign a	ctivities			
Part I-B Comple	oto if the organi	zation is exempt und	lor contion 501/o/	(2)	
	-		. , .	-	^
		rred by the organization un			\$
		rred by organization manag 55 tax, did it file Form 4720			
b If "Yes," describe in					
		zation is exempt und	ler section 501(c),	except section 501(c)(3).
1 Enter the amount d	irectly expended by	the filing organization for se	ection 527 exempt func	tion activities	\$
2 Enter the amount of	f the filing organization	on's funds contributed to o	ther organizations for se	ection 527	
exempt function ac	tivities				\$
		d lines 1 and 2. Enter here		·	
line 17b					\$
		0-POL for this year?			
		yer identification number (E listed, enter the amount pa			
		tly and directly delivered to			
		tional space is needed, pro			
(a) Name	;	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	contributions received ar

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Schedule C (Form 990) 2022

232041 11-08-22

Schedule C (Form 990) 2022	RAYWOLF PR	ESS		91-1	257237 Page 2
Part II-A Complete if the organ section 501(h)).			n 501(c)(3) and file	d Form 5768 (ele	ection under
	n belongs to an affi	liated group (and list ir	Part IV each affiliated g	group member's nam	e, address, EIN,
expenses, and share o	of excess lobbying	expenditures).			
B Check if the filing organizatio	n checked box A a	nd "limited control" pro	ovisions apply.		1
	on Lobbying Expe ures" means amou	nditures ints paid or incurred.))	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influer					
b Total lobbying expenditures to influer					
c Total lobbying expenditures (add line	s 1a and 1b)				
d Other exempt purpose expenditures		· · · · · · · · · · · · · · · · · · ·			
e Total exempt purpose expenditures (
f Lobbying nontaxable amount. Enter t					
If the amount on line 1e, column (a) or (Not over \$500,000		bying nontaxable am the amount on line 1e.			
Over \$500,000 but not over \$1,000,0		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,00		00 plus 5% of the exce			
Over \$17,000,000	\$1,000,	•			
	, Ţ.,=_,				
g Grassroots nontaxable amount (enter	25% of line 1f)				
h Subtract line 1g from line 1a. If zero o			Г		
i Subtract line 1f from line 1c. If zero o	r less, enter -0		[
j If there is an amount other than zero					
reporting section 4911 tax for this ye		eraging Period Under	Saction 501/h)		Yes No
(Some organizations that	t made a section 5		have to complete all of	f the five columns b	elow.
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		1
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

232042 11-08-22

91-1257237 Page 3	91	1	25	72	37	Page 3
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Schedule C (Form 990) 2022 GRAYWOLF PRESS 91-12572 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 each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of th	e lobbying activity.	Yes	No	Amo	ount
1	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?		<u>X</u>		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X		
	Publications, or published or broadcast statements?		X	<u> </u>	1 (71
f	Grants to other organizations for lobbying purposes?	X	37	4	4,671.
g			X		
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
	Other activities?		X	<u> </u>	671
	Total. Add lines 1c through 1i		v	4	4,671.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
	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				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)/5		tion	
Fai	501(c)(6).		<i>y</i> , or sec	JUON	
	001(0)(0).			Yes	No
4	Ware substantially all (2004 or mars) dues resolved pendeductible by members?			100	
1	Were substantially all (90% or more) dues received nondeductible by members?				
2					
3 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from th t III-B Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)(5	b). or sec	tion	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				3. is
	answered "Yes."		()		-,
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a	L	
b	Carryover from last year		2 b		
С	Total		2c	L	
3				L	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditures next year?		4	L	
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
Prov	ide 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	nd 2 (See	
instr	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
PAI	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
<u>SC</u> I	HEDULE C, PART II-B, LINE 1F: THE ORGANIZATION PAYS	MEMBER	SHIP	DUES	

TO ONE ORGANIZATION TO LOBBY ON BEHALF OF THE ORGANIZATION.

Schedule C (Form 990) 2022

232043 11-08-22

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SC	SCHEDULE D Supplemental Financial Statements								
(Form 990) 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.						ZUZZ			
	Department of the Treasury Attach to Form 990. Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.								
Name of the organization Employer id									
GRAYWOLF PRESS 91-1257237									
Pa	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.								
	organization	Tanswered fes of Form 990, Fait IV, in	e o. (a) Donor ac	lvised funds	(h) Funds an	d other accounts			
1	Total number at en	nd of year			(b) i unus an				
2		f contributions to (during year)							
3		f grants from (during year)							
4		t end of year							
5		on inform all donors and donor advisors in v		s held in donor advised fun	ds				
	are the organizatio	n's property, subject to the organization's	exclusive legal contr	ol?		Yes No			
6	Did the organizatio	on inform all grantees, donors, and donor a	dvisors in writing tha	t grant funds can be used c	nly				
	for charitable purp	oses and not for the benefit of the donor o	r donor advisor, or fo	or any other purpose conferr	ing				
De	impermissible priva					Yes No			
		ation Easements. Complete if the org			line 7.				
1		servation easements held by the organization	· · ·						
		of land for public use (for example, recrea	tion or education)	Preservation of a histo	•				
		f natural habitat I of open space		Preservation of a cert	fied historic	structure			
2		through 2d if the organization held a qualif	ied conservation cor	ntribution in the form of a co	nservation e	asement on the last			
-	day of the tax year	. .				at the End of the Tax Year			
а		onservation easements			2a				
b		the state of the second s			2b				
с	Number of conserv	vation easements on a certified historic stru			2c				
d		vation easements included in (c) acquired a							
	historic structure li	sted in the National Register			2d				
3	Number of conserv	vation easements modified, transferred, rel	eased, extinguished	or terminated by the organ	zation during	y the tax			
	year								
4		where property subject to conservation eas							
5	•	tion have a written policy regarding the per							
6	·	orcement of the conservation easements it r hours devoted to monitoring, inspecting,		s and enforcing conservation					
U			nandling of violation			s during the year			
7	Amount of expense	 es incurred in monitoring, inspecting, hand	lling of violations. an	d enforcing conservation ea	sements dur	ing the vear			
				g					
8	Does each conserv	vation easement reported on line 2(d) abov	e satisfy the requirer	nents of section 170(h)(4)(B)	(i)				
	and section 170(h)	(4)(B)(ii)?				Yes No			
9	In Part XIII, describ	be how the organization reports conservation	on easements in its r	evenue and expense statem	ent and				
	balance sheet, and	d include, if applicable, the text of the footn	ote to the organizati	on's financial statements th	at describes	the			
Da	organization's acco	ounting for conservation easements. ations Maintaining Collections of	Art Historical	Traggurag or Other S	imilar Aa				
Га		the organization answered "Yes" on Form		riedsures, or other s	anniai As	5015.			
10	•	elected, as permitted under FASB ASC 95		revenue statement and hal	anaa ahaat u	vorko			
Id	•	easures, or other similar assets held for put	•						
b	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,								
		ng amounts relating to these items:			·				
	(i) Revenue includ	ded on Form 990, Part VIII, line 1			\$				
					•				
2	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:								
а		on Form 990, Part VIII, line 1							
b Assets included in Form 990, Part X \$									
	-	eduction Act Notice, see the Instructions	s tor Form 990.		Sche	dule D (Form 990) 2022			
23205	1 09-01-22		30						
			50						

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Sche	dule D (Form 990) 2022 GRAYWOLI							91-12			age 2
Par	t III Organizations Maintaining Co	ollections of Art	, Hist	orical Tre	asures, or (Other S	Similar	Assets	(contin	nued)	
3											
	collection items (check all that apply):										
а	Public exhibition	d			nange program						
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co							se in Part	XIII.		
5	During the year, did the organization solicit or								-	_	_
Do	to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No										
Fai	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.										
12	Is the organization an agent, trustee, custodia		any for	contributions	or other asset	s not in	cluded				
Ia			•						Yes		No
Ь	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII a							∟	_ 165		
D			owing	LaDIE.					Amount	t	
•	Paginning balance						1c		, ano an		
	Additions during the year						1d				
e	Additions during the year						1e				
f							1f				
	Ending balance Did the organization include an amount on Fo								Yes		No
	If "Yes," explain the arrangement in Part XIII.					-			_		
Par	· · · · · · · · · · · · · · · · · · ·										
		(a) Current year		Prior year	(c) Two years			ears back	(e) Four	vears	back
1a	Beginning of year balance	104,765.	(-7)	104,143.	103,	`	, ,	02,578.	(-,		812.
b	Contributions				/						
	Net investment earnings, gains, and losses	726.		622.	1	041.		524.			767.
	Grants or scholarships			•	,						
	Other expenditures for facilities										
е											
	and programs										
	Administrative expenses	105,491.		104,765.	104,	143	1	03,102.		102	,578.
g 2	End of year balance Provide the estimated percentage of the curre		line 1							102,	
2		ent year end balance		g, column (a)) heid as.						
a	Board designated or quasi-endowment Permanent endowment 94.7900	0/	_%								
b		%									
С											
0-	The percentages on lines 2a, 2b, and 2c should be the second seco					. .					
3a	Are there endowment funds not in the posses	ssion of the organiza	tion tha	at are neid an	a administered	for the			ſ	Yes	No
	organization by:								0-(1)	163	X
	(i) Unrelated organizations								3a(i)		X
	(ii) Related organizations								3a(ii)		
-	If "Yes" on line 3a(ii), are the related organization								3b		L
4 Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipme		vment	tunas.							
	Complete if the organization answered		Part I\	V line 11a S	ee Form 990 F	Part X lir	ne 10				
	Description of property	(a) Cost or ot		(b) Cost			cumulate	d	(d) Bool	k volu	
	Description of property	basis (investm		basis			reciation	iu	(u) 600	k valu	e
19	Land			220,0		1001					
	Buildings										
	Leasehold improvements			37	1,907.		85,99	95.	2.8	5.9	12.
					6,613.		16,45				55.
	EquipmentOther				8,147.		$\frac{10, 1}{65, 74}$				95.
			V. oclus								72.
TOLA	. Add lines 1a through 1e. (Column (d) must ed	<u>uuai Forni 990, Part /</u>	<u>, coiur</u>	<u>ии (в), Iine I (</u>				 Schedule			
							•	ooneuule	וווטיון ש	1 3 30	1 2022

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Schedule D (Form 990) 2022 GRAYWOLF PRESS

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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

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, col. (B) line 13.)		

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) ROYALTY ADVANCES	525,678.
(2) ROU ASSETS	340,628.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	866,306.
Part X Other Liabilities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11	If. See Form 990, Part X, line 25.
1 (a) Description of liability	(b) Book value

1.	(a) Description of hability	(b) BOOK value
(1)	Federal income taxes	
(2)	ROYALTY PAYABLE	<u>337,617.</u> 654,233.
(3)	LEASE LIABILITIES	654,233.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	991,850.

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 ... X

Schedule D (Form 990) 2022

232053 09-01-22

_	dule D (Form 990) 2022 GRAYWOLF PRESS				1257237	Page 4
Par			Revenue per Re	eturn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			4 0 0 0	470
1				1	4,000,	,4/8.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1				
а	Net unrealized gains (losses) on investments		-207,237.	-		
b	Donated services and use of facilities			-		
С	Recoveries of prior year grants			_		
d	Other (Describe in Part XIII.)	. 2d	830,901.			
е	Add lines 2a through 2d			2e	623	,664.
3	Subtract line 2e from line 1			3	3,376,	,814.
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.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,376,	,814.
Par	t XII Reconciliation of Expenses per Audited Financial Statem	ients Wit	h Expenses per l	Retur	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 123	a.				
1	Total expenses and losses per audited financial statements			1	4,910,	,002.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	. 2a				
b	Prior year adjustments	. 2b				
с	Other losses	. 2c				
d	Other (Describe in Part XIII.)		830,901.			
е	Add lines 2a through 2d			2e		,901.
3	Subtract line 2e from line 1			3	4,079,	,101.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	. 4b				
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	4,079,	,101.
Par	t 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:

THE FUNDS DRAWN FROM THE ENDOWMENT SHALL BE USED FOR THE PURPOSE OF					
SUPPORTING THE GRAYWOLF PRESS NONFICTION PRIZE UNTIL SUCH TIME AS SUCH					
CHARITABLE USE, IN THE JUDGMENT OF THE TRUSTEE (OR THE TRUSTEES DESIGNATED					
REPRESENTATIVE) AND THE BOARD OF DIRECTORS OF GRAYWOLF PRESS, BECOMES					
UNDESIRABLE, IMPRACTICAL, IMPOSSIBLE, OR NO LONGER ADAPTS TO THE MISSION					
OF GRAYWOLF PRESS.					
PART X, LINE 2:					
THE ORGANIZATION HAS A TAX-EXEMPT STATUS UNDER SECTION 501 (C)(3) OF THE					

INTERNAL REVENUE CODE AND HAS ADOPTED ACCOUNTING FOR UNCERTAINTY IN INCOME

TAXES, ASC 740-10. THE ORGANIZATION'S POLICY IS TO EVALUATE UNCERTAIN TAX
232054 09-01-22
Schedule D (Form 990) 2022
33

Schedule D (Form 990) 2022 GRAYWOLF PRESS 91-1257237 Page 5
Part XIII Supplemental Information (continued)
POSITIONS, AT LEAST ANNUALLY, FOR THE POTENTIAL FOR INCOME TAX EXPOSURE
FROM UNRELATED BUSINESS INCOME OR FROM LOSS OF NONPROFIT STATUS. THE
ORGANIZATION CONTINUES TO OPERATE CONSISTENT WITH ITS ORIGINAL EXEMPTION
APPLICATION AND EACH YEAR TAKES THE NECESSARY ACTIONS TO MAINTAIN ITS
EXEMPT STATUS. IT HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A
PRIVATE FOUNDATION UNDER THE INTERNAL REVENUE CODE AND CHARITABLE
CONTRIBUTIONS BY DONORS ARE TAX DEDUCTIBLE.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
COST OF GOODS SOLD 830,901.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
COST OF GOODS SOLD 830,901.

232055 09-01-22

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OMB No. 1545-0047 Supplemental Information to Form 990 or 990-EZ SCHEDULE O Complete to provide information for responses to specific questions on (Form 990) Form 990 or 990-EZ or to provide any additional information. Open to Public Attach to Form 990 or Form 990-EZ. Department of the Treasury Go to www.irs.gov/Form990 for the latest information. Inspection Internal Revenue Service Employer identification number Name of the organization 91-1257237 GRAYWOLF PRESS FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

UNDERREPRESENTED AND DIVERSE VOICES IN A CROWDED MARKETPLACE. WE

BELIEVE WORKS OF LITERATURE NOURISH THE READER'S SPIRIT AND ENRICH

BROADER CULTURE, AND THAT THEY MUST BE SUPPORTED BY ATTENTIVE EDITING,

COMPELLING DESIGN, AND CREATIVE PROMOTION.

FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE IS COMPRISED OF THE FOUR OFFICERS OF THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE MAY ACT DURING INTERVALS BETWEEN MEETINGS OF THE BOARD OF DIRECTORS, DURING WHICH AND SUBJECT TO THE BOARD'S CONTROL AND DIRECTION, THE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL OF THE AUTHORITY AND POWERS OF THE BOARD OF DIRECTORS SUBJECT TO SUCH LIMITATIONS AS THE BOARD MAY IMPOSE FROM TIME TO TIME. UNLESS SPECIFICALLY AUTHORIZED BY THE BOARD OF DIRECTORS BY RESOLUTION APPROVED BY THE AFFIRMATIVE VOTE OF MAJORITY OF THE DIRECTORS, THE EXECUTIVE COMMITTEE SHALL NOT HAVE THE А AUTHORITY AND POWER TO ELECT OFFICERS, TO AMEND THE ARTICLES OF TO ADOPT A PLAN OF MERGER OR CONSOLIDATION, TO AUTHORIZE THE INCORPORATION, ENCUMBRANCE OR DISPOSITION OF ALL OR SUBSTANTIALLY ALL OF THE SALE . PROPERTY AND ASSETS OF THE CORPORATION, TO AUTHORIZE A VOLUNTARY DISSOLUTION OF THE CORPORATION OR A REVOCATION THEREOF, OR TO AMEND THE BYLAWS.

FORM 990, PART VI, SECTION B, LINE 11B:	
THE DRAFT FORM 990 IS REVIEWED IN DETAIL BY THE FINANCE AND C	OPERATIONS
COMMITTEE. THE BOARD WILL BE PROVIDED AN ELECTRONIC OR PAPER	COPY OF THE
FINAL FORM 990, REFLECTING ANY CHANGES MADE AT THE DIRECTION	OF THE
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990) 2022
232211 10-28-22	

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Schedule O (Form 990) 2022	Page 2
Name of the organization	Employer identification number
GRAYWOLF PRESS	91-1257237

COMMITTEE, ALONG WITH THE COMMITTEE'S RECOMMENDATION THAT THE BOARD AUTHORIZE ITS EXECUTION AND FILING ON BEHALF OF THE ORGANIZATION. BEFORE TAKING ACTION ON THE COMMITTEE'S RECOMMENDATION, THE BOARD WILL BE AFFORDED THE OPPORTUNITY TO RAISE QUESTIONS ABOUT THE CONTENT OF THE FORM 990 WITH MEMBERS OF THE COMMITTEE AND/OR THE FIRM'S EXTERNAL AUDITORS.

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

THE DRAFT FORM 990 IS REVIEWED IN DETAIL BY THE FINANCE AND OPERATIONS COMMITTEE. THE BOARD WILL BE PROVIDED AN ELECTRONIC OR PAPER COPY OF THE FIANL FORM 990, REFLECTING ANY CHANGES MADE AT THE DIRECTION OF THE COMMITTEE, ALONG IWH THTE COMMITTEE'S RECOMMENDATION THAT THE BOARD AUTHORIZE ITS EXECUTION AND FILING ON BEHALF OF THE ORGANIZATION. BEFORE TAKING ACTION ON THE COMMITTEE'S RECOMMENDATION, THE BOARD WILL BE AFFORDED THE OPPORTUNITY TO RAISE QUESTIONS ABOUT THE CONTENT OF THE FORM 990 WITH MEMBERS OF THE COMMITTEE AND/OR THE FIRM'S EXTERNAL AUDITORS.

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

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY COVERS BOARD DIRECTORS, OFFICERS, AND EMPLOYEES (RESPONSIBLE PERSONS). EACH RESPONSIBLE PERSON SHALL ANNUALLY COMPLETE A DISCLOSURE FORM IDENTIFYING ANY RELATIONSHIPS, POSITIONS, OR CIRCUMSTANCES IN WHICH THE RESPONSIBLE PERSON IS INVOLVED THAT HE OR SHE BELIEVES COULD CONTRIBUTE TO A CONFLICT OF INTEREST ARISING.

ANNUAL DISCLOSURE FORMS AND OTHER DISCLOSURES MADE UNDER THE POLICY ARE REVIEWED BY THE EXECUTIVE DIRECTOR AND BOARD CHAIR. WHERE A CONFLICT IS DETERMINED TO EXIST, RESPONSIBLE PERSONS ARE RECUSED FROM POTENTIALLY CONFLICTED DECISIONS IN ACCORDANCE WITH THE POLICY.

232212 10-28-22

Schedule O (Form 990) 2022 Page 2	
Name of the organization	Employer identification number
GRAYWOLF PRESS	91-1257237
A RESPONSIBLE PERSON HAVING A CONFLICT OF INTEREST WITH RE	SPECT TO A

TRANSACTION SHALL DISCLOSE ALL MATERIAL FACTS, SHALL RECUSE HIM/HERSELF

FROM PARTICIPATING IN ANY DISCUSSION OR VOTE, AND SHALL REFRAIN FROM ANY

ACTION THAT MAY AFFECT THE ORGANIZATION'S PARTICIPATION IN THE TRANSACTION.

THIS WILL BE REFLECTED IN THE MINUTES FOR THE MEETING. IF IT IS UNCLEAR

WHETHER A CONFLICT EXISTS, THE EXECUTIVE DIRECTOR OR BOARD CHAIR WILL MAKE

A DETERMINATION.

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

ACTIONS AFFECTING THE COMPENSATION OF THE EXECUTIVE DIRECTOR ARE APPROVED BY THE BOARD OF DIRECTORS BASED UPON THE RECOMMENDATION OF THE BOARD CHAIR AND THE CHAIR OF THE BOARD'S FINANCE AND OPERATIONS COMMITTEE. THESE RECOMMENDATIONS ARE BASED ON, AMONG OTHER THINGS, (1) THE RESPONSIBILITIES AND REQUIREMENTS OF THE EXECUTIVE DIRECTOR, AS DETERMINED BY THE BOARD OF DIRECTORS; (2) REFERENCE TO THE COMPENSATION OF INDIVIDUALS IN POSITIONS DEEMED COMPARABLE TO THAT OF THE EXECUTIVE DIRECTOR, AS FOUND (FOR EXAMPLE) IN THE MINNESOTA NONPROFIT SURVEY; AND (3) THE PERFORMANCE OF THE ORGANIZATION UNDER THE EXECUTIVE DIRECTOR'S LEADERSHIP, IN ACHIEVING THE GOALS ESTABLISHED IN ITS STRATEGIC PLAN ADOPTED BY THE BOARD. THE DELIBERATIONS AND DECISION OF THE BOARD ARE UNDERTAKEN IN A MINUTED EXECUTIVE SESSION. THE PROCESS WAS UNDERTAKEN ON JANUARY 24, 2022 TO APPROVE THE CURRENT COMPENSATION OF THE EXECUTIVE DIRECTOR, F. MCCRAE.

AS PART OF THE ANNUAL BUDGET PROCESS, THE EXECUTIVE DIRECTOR WILL RECOMMEND THE COMPENSATION FOR EACH MEMBER OF THE STAFF WHICH WILL BE REVIEWED WITH THE CHAIR OF THE BOARD OF DIRECTORS AND THE CHAIR OF THE BOARD'S FINANCE AND OPERATIONS COMMITTEE. ON THE BASIS OF THIS REVIEW, THE BOARD CHAIR AND THE COMMITTEE CHAIR WILL RECOMMEND APPROVAL BY THE BOARD OF THE AGGREGATE 232212 10-28-22 37

11410609 131839 A424396

Schedule O (Form 990) 2022	Page 2
Name of the organization	Employer identification number
GRAYWOLF PRESS	91-1257237

AMOUNT BUDGETED FOR STAFF COMPENSATION FOR THE RELEVANT PERIOD. OUTSIDE THE ANNUAL BUDGETING PROCESS, THE EXECUTIVE DIRECTOR MAY APPROVE COMPENSATION INCREASES AND OFFERS OF EMPLOYMENT SPECIFYING COMPENSATION, FOR INDIVIDUAL STAFF MEMBERS UPON PRIOR CONSULTATION WITH THE BOARD CHAIR AND/OR THE COMMITTEE CHAIR.

FOR SALARY DETERMINATION, GUIDELINES ARE DEVELOPED BASED ON A SPECIALIST'S SURVEY OF COMPENSATION PAID BY OTHER NOT-FOR-PROFIT ORGANIZATIONS FOR COMPARABLE POSITIONS TO ASSIST IN ASSESSING THE APPROPRIATENESS OF COMPENSATION FOR ALL STAFF POSITIONS CONTEMPLATED BY THE BUDGET. THESE GUIDELINES ARE APPLIED IN ALL DETERMINATIONS ABOUT COMPENSATION. THE MOST RECENT COMPENSATION REVIEW WAS PERFORMED FOR CARMEN SMITH ON JUNE 15, 2022. THE PROCESS DESCRIBED HERE WAS LAST COMPLETED IN 2022

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE PROCESS DID NOT CHANGE FROM THE PRIOR YEAR.

232212 10-28-22