

**Political Organization  
Report of Contributions and Expenditures**

OMB No. 1545-1696

► See separate instructions.

**A For the period beginning** 01/01/2021 **and ending** 06/30/2021

**B Check applicable box:** ☒ Initial report ☐ Change of address ☐ Amended report ☐ Final report

**1 Name of organization** Fund for Student Success **Employer identification number** 83 - 1322288

**2 Mailing address (P.O. box or number, street, and room or suite number)**  
400 N 3rd St

**City or town, state, and ZIP code**  
Harrisburg, PA 17101

**3 E-mail address of organization:** jhowlett@psea.org **4 Date organization was formed:** 07/24/2018

**5a Name of custodian of records** Joseph F. Howlett  
**5b Custodian's address** 400 N 3rd St  
Harrisburg, PA 17101

**6a Name of contact person** Lahrsen Harper  
**6b Contact person's address** 400 N 3rd St  
Harrisburg, PA 17101

**7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number**  
400 N 3rd St

**City or town, state, and ZIP code**  
Harrisburg, PA 17101

**8 Type of report (check only one box)**

- ☐ First quarterly report (due by April 15)  
☐ Second quarterly report (due by July 15)  
☐ Third quarterly report (due by October 15)  
☐ Year-end report (due by January 31)  
☒ Mid-year report (Non-election year only-due by July 31)
- ☐ Monthly report for the month of:  
(due by the 20th day following the month shown above, except the December report, which is due by January 31)  
☐ Pre-election report (due by the 12th or 15th day before the election)  
(1) Type of election:  
(2) Date of election:  
(3) For the state of:  
☐ Post-general election report (due by the 30th day after general election)  
(1) Date of election:  
(2) For the state of:

**9 Total amount of reported contributions (total from all attached Schedules A).....9. \$ 925000**

**10 Total amount of reported expenditures (total from all attached Schedules B).....10. \$ 0**

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Lahrsen Harper

07/26/2021

**Sign  
Here**



Signature of authorized official



Date

Schedule AItemized Contributions		Schedule A
Contributor's name, mailing address and ZIP code Pennsylvania State Education Association 400 N 3rd St Harrisburg, PA 17101	Name of contributor's employer	
	Contributor's occupation	Amount of contribution
	Aggregate contributions year-to-date	Date of contribution

