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#### EXTENDED TO MAY 17, 2021

JUL 1,

(Rev. January 2020) Department of the Treasury

A For the 2019 calendar year, or tax year beginning

Return of Organization Exempt From Income Tax

2019

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.

and ending JUN 30,

Open to Public

2020

OMB No. 1545-0047

Check if applicable: C Name of organization D Employer identification number Address change UNBOUNDED LEARNING, INC. Name change 47-5223320 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 646-415-2118 228 PARK AVE S. 90834 14,270,918. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return 10003-1502 NEW YORK, NY H(a) Is this a group return Applica-tion pending F Name and address of principal officer: LACEY ROBINSON for subordinates? ..... Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status:  $\mathbf{X}$  501(c)(3)  $\mathbf{\Box}$  501(c) ( ) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► HTTPS: //WWW.UNBOUNDED.ORG/ **H(c)** Group exemption number ▶ K Form of organization: X Corporation Association Other > L Year of formation: 2015 M State of legal domicile: NY ☐ Trust Part I Summary Briefly describe the organization's mission or most significant activities: OUR VISION IS THAT EDUCATION **Activities & Governance** SYSTEMS DISRUPT SYSTEMIC RACISM BY PROVIDING STUDENTS OF COLOR if the organization discontinued its operations or disposed of more than 25% of its net assets. 9 3 Number of voting members of the governing body (Part VI, line 1a) 7 Number of independent voting members of the governing body (Part VI, line 1b) 4 39 5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 39 0. 7h **Prior Year Current Year** 7,066,083. 5,294,116. Contributions and grants (Part VIII, line 1h) 8 4,797,973. 8,976,702. Program service revenue (Part VIII, line 2g) 150. 100. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 11 14,270,918 11,864,206. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 6,187,468. 5,140,089. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 5,688,306. 7,024,035. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 11,875,774. 12,164,124. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -11,568. 2,106,794. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 5 7,500,380. 6,994,583. 20 Total assets (Part X, line 16) 5,701,742. 3,089,151. 21 Total liabilities (Part X, line 26) 三年 798,638. 3,905,432 22 Net assets or fund balances. Subtract line 21 from line 20 ... Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign LAURA SMITH, SECRETARY & TREASURER Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature 04/27/21 P00150750 MICHELLE CAIN MICHELLE CAIN self-employed Paid Firm's name ▶ MENGEL, METZGER, BARR & CO. LLP Firm's EIN ▶ 16-1092347 Preparer Firm's address 100 CHESTNUT STREET, SUITE 1200 Use Only Phone no. 585-423-1860 ROCHESTER, NY 14604 X Yes May the IRS discuss this return with the preparer shown above? (see instructions) No

Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	OUR VISION IS THAT EDUCATION SYSTEMS DISRUPT SYSTEMIC RACISM BY
	PROVIDING STUDENTS OF COLOR MEANINGFUL, ENGAGING, AND AFFIRMING
	GRADE-LEVEL INSTRUCTION. MEANINGFUL, ENGAGING, AND AFFIRMING
	GRADE-LEVEL INSTRUCTION IS THE RESULT OF COMBINING ANTIRACIST IDEOLOGY
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4-	revenue, if any, for each program service reported.  (Code: ) (Expenses \$ 7,944,154. including grants of \$ ) (Revenue \$ 6,592,028.)
4a	(Code:) (Expenses \$ 7,944,154. including grants of \$) (Revenue \$ 6,592,028.)  UNBOUNDED HOSTED 2 STANDARDS INSTITUTE EVENTS IN JULY 2019, FEBRUARY
	2020; REACHING OVER 2,800 EDUCATORS AND PARTNERS FROM DISTRICTS AND
	CMOS.
	<u>CMOD</u> .
	PARTICIPANTS IN ALMOST EVERY COURSE AND DISTRICT/ORGANIZATION, AS WELL
	AS ACROSS ALL ROLES, SHOWED GAINS IN KNOWLEDGE AFTER ATTENDING THE
	INSTITUTE. ALL STAFF MEMBERS WORKED THE EVENTS AND WERE PART OF THE
	CONTENT DEVELOPMENT AND OPERATIONS OF THE EVENTS.
4b	(Code:) (Expenses \$ 1,065,997. including grants of \$) (Revenue \$1,430,958.)
	OUR TWO COHORT PROGRAMS, THE SYSTEM LEADER ACADEMY AND THE EQUITY
	INFLUENCER RESIDENCY, WORK IN TANDEM TO BUILD A SYSTEM'S CAPACITY BY
	TRAINING COHORTS OF LEADERS WHO BECOME CHANGE AGENTS FOR SUPPORTING
	EFFECTIVE, EQUITY-FOCUSED INSTRUCTIONAL PRACTICES. WHEREAS THE EQUITY
	INFLUENCER RESIDENCY (EIR) DEVELOPS TEACHER LEADERS, COACHES,
	PRINCIPALS, AND SUPPORT STAFF WHO DIRECTLY BUILD CAPACITY IN TEACHERS
	TO SUCCESSFULLY IMPLEMENT EQUITABLE INSTRUCTIONAL PRACTICES, THE SYSTEM
	LEADER ACADEMY (SLA) DEVELOPS LEADERS AT THE HIGHEST LEVELS OF A
	DISTRICT TO IMPLEMENT SYSTEMS THAT SCALE EQUITABLE INSTRUCTION.
4-	(Code: ) (Expenses \$ 848,890 • including grants of \$ ) (Revenue \$ 654,021 • )
4c	(Code:) (Expenses \$ 848,890. including grants of \$) (Revenue \$654,021.)  VIRTUAL SUMMIT - UNBOUNDED'S INTERACTIVE TWO-DAY VIRTUAL SUMMIT FOR
	TEACHERS, COACHES, AND LEADERS EMPHASIZES INSTRUCTIONAL PLANNING IN THE
	COMPLEX ERA COVID-19 AND AMIDST A HISTORICAL ANTI-RACIST MOVEMENT. WITH
	AN EMPHASIS ON GRADE-LEVEL CURRICULUM, STRATEGIC SUPPORTS, AND
	EQUITABLE INSTRUCTION, THE UNBOUNDED VIRTUAL SUMMIT MOVES EDUCATORS
	THROUGH PLANNING PROCESSES THAT CAN PRODUCE MEANINGFUL, ENGAGING
	IN-PERSON AND VIRTUAL CLASSROOM EXPERIENCES. TEACHERS & COACHES LEAVE
	THE VIRTUAL SUMMIT BETTER PREPARED TO MAKE INFORMED DECISIONS THAT
	ADDRESS UNFINISHED INSTRUCTION WHILE REMAINING IN GRADE-LEVEL
	CURRICULUM, AND LEADERS LEAVE THE VIRTUAL SUMMIT BETTER PREPARED TO
	MAKE DECISIONS THAT ENSURE STUDENTS HAVE EQUITABLE ACCESS TO
	GRADE-LEVEL INSTRUCTION.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 226,003 • including grants of \$ ) (Revenue \$ 299,695 • )
4e	Total program service expenses ► 10,085,044.
	Form <b>990</b> (2019)

# Form 990 (2019) UNBOUNDED LEARNING, INC. Part 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		Х
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 Revenue Procedure 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	<u> </u>		<del></del>
Ü	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,	-		
′		7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<b>-</b>		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<sub>V</sub>
_	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?			٦,
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
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
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		Х
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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
124	•	12a	х	
h	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
D	•	12b		V X
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			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	441		x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			<b>.</b>
	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			,,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
_	•	_		_

Form 990 (2019) UNBOUNDED LEARNING, INC.
Part IV Checklist of Required Schedules (continued)

	, and the state of		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	NO
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			- V
	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%	00		x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee 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 Schedule L, Part IV	21		
20	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>			
-	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
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			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			,,
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	25.		
26	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?	26		X
37	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		<u> </u>
31		37		x
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	31		1
50	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance	_ 33		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b				
С				
	(gambling) winnings to prize winners?	1c		

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019) UNBOUNDED LEARNING, INC.
Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

					Yes	No		
<b>2</b> a	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	39					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	Х			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				37		
				3a		Х		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a financial account in a foreign country (such as a bank account, securities account, or other financial a		•	40		Х		
h	If "Yes," enter the name of the foreign country	ccour	щ:	4a		21		
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?							
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			<u>5a</u> 5b		X		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the							
	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 contribution		ŭ					
	were not tax deductible?			6b				
7	Organizations that may receive deductible contributions under section 170(c).					37		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser			7a		X		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		uirod	7b				
C	to file Form 8282?			7c		х		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		•	7e		Х		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		Х		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion fil	e a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	е					
	sponsoring organization have excess business holdings at any time during the year?			8				
9	Sponsoring organizations maintaining donor advised funds.							
				9a				
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b				
10	Section 501(c)(7) organizations. Enter:	100	1					
	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b						
	Section 501(c)(12) organizations. Enter:		1					
 а	Gross income from members or shareholders	11a	1					
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	11b						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b						
	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?			13a				
_	<b>Note:</b> 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	امد ا	ı					
_	organization is licensed to issue qualified health plans	13b						
	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	13c	L	14a		X		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner							
-	excess parachute payment(s) during the year?			15		Х		
	If "Yes," see instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incor	ne?	16		Х		
	If "Yes," complete Form 4720, Schedule O.							

Par	Tt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b bel	ow, and for a '	'No" re	espons	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instruction	tions.			
	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	9			
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any officer.	ner			
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supe	rvision			
	of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		Х
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or				
	more members of the governing body?		7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,				
	persons other than the governing body?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow	/ing:			
а	The governing body?		8a	Х	
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 reached at the				
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.	)			
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affilia	ites,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe				
	in Schedule O how this was done		12c	X	
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 independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a	X	
	Other officers or key employees of the organization		15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a				
	taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its particip				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's				
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶NY, MA, OK, WA, CA, AR, CO	O,ID,LA	, MD	MI,	, TX
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Sec				
	for public inspection. Indicate how you made these available. Check all that apply.	,,,,,	,,		
	Own website Another's website X Upon request Other (explain on Schedule	e O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of inter	,	finan	cial	
	statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization's books and record	rds <b>&gt;</b>			
	LAURA SMITH - 646-415-2118	-			
	228 PARK AVE S., NO. 90834, NEW YORK, NY 10003-1502				

SEE SCHEDULE O FOR FULL LIST OF STATES

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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 and/or Box 7 of Form 1099-MISC) 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.

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

See instructions for the order in which to list the persons above.

(A)  Name and title	(B) Average		not c	Pos heck	more	than o		(D)  Reportable	<b>(E)</b> Reportable	(F) Estimated
	hours per week (list any	offi	oox, unless pers officer and a dire					compensation from the	compensation from related organizations	amount of other compensation
	hours for	ndividual trustee or director				ted		organization	(W-2/1099-MISC)	from the
	related organizations	ustee o	nstitutional trustee		9 9	Highest compensated employee		(W-2/1099-MISC)		organization and related
	below	idual tr	utional	<u></u>	Key employee	st con oyee	er			organizations
	line)	Indiv	Instit	Officer	Key e	Highe empl	Former			
(1) LAURA SMITH	40.00									
SECRETARY/TREASURER/COO		Х		Х				284,124.	0.	18,108.
(2) KATE GERSON	40.00									
PRESIDENT AND CEO - THRU JULY 2019	1 00	Х		X				323,993.	0.	8,529.
(3) JEFF LIVINGSTON	1.00	ļ								
BOARD OF DIRECTOR	1 00	Х						0.	0.	0.
(4) PETER CUNNINGHAM	1.00								•	•
BOARD OF DIRECTOR - THRU FEB 2020	1 00	Х						0.	0.	0.
(5) SHAUN NELMS	1.00	3,7							0	0
BOARD OF DIRECTOR	1 00	Х						0.	0.	0.
(6) DOUG BORCHARD	1.00	<b>.</b> ,							0	0
BOARD OF DIRECTOR (7) JUDY WURTZEL	1 00	Х						0.	0.	0.
BOARD OF DIRECTOR - THRU MAY 2020	1.00	Х						0.	0.	0.
(8) LACEY ROBINSON	40.00	^						0.	0.	<u> </u>
PRESIDENT AND CEO - AS OF OCT 2019	40.00	х		х				296,024.	0.	19,299.
(9) MAYA GOODALL	1.00							230,021		13 / 233 (
BOARD OF DIRECTOR		х						0.	0.	0.
(10) DR ARUN RAMANATHAN	1.00							-	-	-
BOARD OF DIRECTOR		Х						0.	0.	0.
(11) JASON ZIMBA	1.00									
BOARD OF DIRECTOR		Х						0.	0.	0.
(12) MIKE PERIGO	1.00									
BOARD OF DIRECTOR - AS OF MAY 2020		Х						0.	0.	0.
(13) PETER COE	40.00									
CHIEF ACADEMIC OFFICER					Х			222,681.	0.	31,857.
(14) TAYA PAGE	40.00									
CHIEF PRODUCT OFFICER					Х			215,826.	0.	25,972.
(15) LAKISHA COVERT	40.00									
EXECUTIVE DIRECTOR, STANDARDS INSTIT					Х			172,598.	0.	6,378.
(16) ANDREA HANCOCK	40.00	1							_	
DEPUTY CHIEF, PROGRAM DESIGN AND DEV	10.00				Х			181,992.	0.	28,166.
(17) KRISTEN EHLMAN	40.00	-						4== 4.5		40 - 40
EXECUTIVE DIRECTOR, PROGRAM AND ENGA						Х		175,648.	0.	13,743.

932007 01-20-20

Part VII   Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	j Hi	ghes	t Co	ompensated Employee	s (continued)			
(A)	(B)			(0	C)			(D)	(E)		(F	:)
Name and title	Average	(do	Position (do not check more than one				nne	Reportable Reportable			Estim	ated
	hours per	box	box, unless person is both an officer and a director/trustee)			is both	an	compensation	compensation	ı	amou	nt of
	week		cer an	ia a a	irecto	or/trus	tee)	from	from related		oth	
	(list any hours for	irecto						the	organizations		comper	
	related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	ا (ر	from organi	
	organizations	ruste	ll trus		ee Ge	mpen		(***271099*****100)			and re	
	below	ndividual trustee or director	nstitutional trustee	-	sey employee	st co	er				organiz	
	line)	Indivi	Instit	Officer	Key er	Highest compensated employee	Former				Ü	
(18) JASON SCHWEID	40.00											
EXECUTIVE DIRECTOR, RESEARCH, DESIGN						Х		179,072.		0.	11,	531.
										$\perp$		
										$\perp$		
										$\perp$		
										$\rightarrow$		
1b Subtotal								2,051,958.			<u>163,</u>	583.
c Total from continuation sheets to Part VI								0.		0.	1.50	0.
d Total (add lines 1b and 1c)							<u> </u>	2,051,958.		0.	<u>163,</u>	583.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	e) wh	o re	ceived more than \$100,	000 of reportable			0.5
compensation from the organization												25
											Ye	s No
3 Did the organization list any former officer,	•		•	•	•		•	·	•			
line 1a? If "Yes," complete Schedule J for s										∟	3	<u> </u>
4 For any individual listed on line 1a, is the su	-		-					· · · · · · · · · · · · · · · · · · ·	-		_	_
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	plete Schedule	e J fo	or su	ıch <u>ı</u>	oers	on .					5	X
Section B. Independent Contractors												
1 Complete this table for your five highest co	•	•							·	nsatio	on from	
the organization. Report compensation for	the calendar ve	ear e	ndir	na w	ith o	or wi	thin	the organization's tax ve	ear.			

(A) Name and business address	(B) Description of services	(C) Compensation
LEARNING TAPESTRY	TECH & ENGINEERING	
340 S LEMON AVE #6452, WALNUT, CA 91789	CONSULTING	372,572.
J&S AUDIO VISUAL	AUDIO VISUAL	
PO BOX 671170, DALLAS, TX 75267-1170	CONFERENCE SERVICE	337,612.
EVENTSHOP, INC	EVENT PLANNING	
718 HIGH POINT WAY, KNOXVILLE, TN 37912	SERVICES	207,315.
HONIG BUSINESS SOLUTIONS, LLC	FINANCE & OPERATIONS	
62 HAYS HILL RD, PLEASANTVILLE, NY 10570	CONSULTING	182,243.
A L BERRY CONSULTING, INCORPORATED	SALES & MARKETING	
2724 KIPLING ST 809, HOUSTON, TX 77098	STRATEGY CONSULTING	162,744.
2 Total number of independent contractors (including but not limited to those liste		
\$100,000 of compensation from the organization > 7		

Form 990 (2019) UNBOUND
Part VIII Statement of Revenue

			Check if Schedule O contains a respo	nse d	or note to any lin	e in this Part VIII			
			Chock in Controlling Controlling a respe			(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
40									00000010 0 12 0 1 1
Contributions, Gifts, Grants and Other Similar Amounts	1 :		Federated campaigns 1a						
ira ou	ı		Membership dues 1b						
s, (	•	С	Fundraising events 1c						
ä ji	(	d	Related organizations 1d						
s, C	(	е	Government grants (contributions) 1e						
Sig	1	f	All other contributions, gifts, grants, and						
he bt			similar amounts not included above 1f		5,294,116.				
즐		a	Noncash contributions included in lines 1a-1f	;					
Š	ì	_	Total. Add lines 1a-1f			5,294,116.			
<u> </u>		<u>''</u>	Total / Nad lines Ta Ti		Business Code	, , ,			
-	•	_	CONTRACTED SERVICES		611710	8,920,617.	8,920,617.		
ice	2 6	_	MISCELLANEOUS		900099	56,085.	, ,		
Program Service Revenue		~	MISCELLANEOUS		900099	36,063.	56,085.		
n S	•	С		_					
g a	•	d							
о Б	•	е							
<u> </u>	1	f	All other program service revenue						
	9	g	Total. Add lines 2a-2f			8,976,702.			
	3		Investment income (including dividends, in						
			other similar amounts)			100.			100.
	4		Income from investment of tax-exempt box						
	5		•	•	•				
	3		Royalties(i) Real		(ii) Personal				
	_				(ii) i ersoriai				
			Gross rents 6a						
			Less: rental expenses 6b						
	•	С	Rental income or (loss) 6c						
	(	d	Net rental income or (loss)		<b>)</b>				
	7 :	а	Gross amount from sales of (i) Securit	es	(ii) Other				
			assets other than inventory 7a						
		b	Less: cost or other basis						
ē			and sales expenses 7b						
eur		c	Gain or (loss) 7c						
ě		d	Net gain or (loss)		<b></b>				
her Revenue			Gross income from fundraising events (not						
	0 (	a							
Ò			including \$ of						
			contributions reported on line 1c). See						
			,	8a					
	ı	b	Less: direct expenses	8b					
	•	С	Net income or (loss) from fundraising even	ts	<b>)</b>				
	9 a	а	Gross income from gaming activities. See						
			Part IV, line 19	9a					
		b	Less: direct expenses	9b					
			Net income or (loss) from gaming activities	<u> </u>					
			Gross sales of inventory, less returns		,				
		_	and allowances	10a					
		h		10b					
			Less: cost of goods sold	$\overline{}$					
-		Ü	Net income or (loss) from sales of inventor	y					
<u>s</u>					Business Code				
eor Ie	11 a			_					
an EDF	ı	b		_					
Miscellaneous Revenue	•	С							
Ais	(	d	All other revenue						
_		e	Total. Add lines 11a-11d		<b>)</b>				
	12		Total revenue. See instructions			14,270,918.	8,976,702.	0.	100.

Paction FO1(a)(2) and FO1(a)(4) aggregations must complete all columns. All other aggregations must complete solumn (

	Check if Schedule O contains a respons	se or note to any line in (A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,803,176.	891,365.	799,447.	112,364
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,654,374.	2,426,860.	88,192.	139,322
8	Pension plan accruals and contributions (include		. ,	, -	,
-	section 401(k) and 403(b) employer contributions)	83,367.	68,104.	10,441.	4.822
9	Other employee benefits	304,559.	232,549.	54,876.	4,822 17,134
10	Payroll taxes	294,613.	220,034.	57,941.	16,638
11	Fees for services (nonemployees):		==0,0010	2.,2.2.	
'' a	Management				
b	-	83,373.	54,193.	20,843.	8,337
	Legal	239,620.	142,753.	41,962.	54,905
	Accounting	233,020.	112,733.	41,5021	34,505
	Lobbying  Professional fundraising services. See Part IV, line 17				
e					
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	283,260.	152,410.		130,850
	column (A) amount, list line 11g expenses on Sch O.)	486,473.	118,017.	368,456.	130,030
12	Advertising and promotion	195,331.	132,725.	54,032.	8,574
13	Office expenses	251,512.	251,512.	34,032.	0,3/4
14	Information technology	231,312.	231,312.		
15	Royalties	10 025	14 150	2 714	1 060
16	Occupancy	18,935.	14,152.	3,714.	1,069
17	Travel	362,382.	350,048.	1,826.	10,508
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15 000		15 000	
23	Insurance	17,280.		17,280.	
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.)		4 0 - 2 - 2 - 2		
а	STANDARD INSTITUTE & PR	4,978,665.	4,978,665.		
b	STAFF DEVELOPMENT	55,547.		55,547.	
С	BAD DEBT EXPENSE	30,375.	30,375.		
d	PILOT PROGRAM COSTS	21,282.	21,282.		
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	12,164,124.	10,085,044.	1,574,557.	504,523
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Pai	rt X	Balance Sneet		
		Check if Schedule O contains a response or note to any line in this Part X		
			<b>(A)</b> Beginning of year	<b>(B)</b> End of year
	1	Cash - non-interest-bearing	6,052,495.	1 5,785,224
	2	Savings and temporary cash investments		2 99,282
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net		4 1,063,467
	5	Loans and other receivables from any current or former officer, director,		
		trustee, key employee, creator or founder, substantial contributor, or 35%		
		controlled entity or family member of any of these persons		5
	6	Loans and other receivables from other disqualified persons (as defined		
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6
S	7	Notes and loans receivable, net		7
Assets	8	Inventories for sale or use		8
ğ	9	Prepaid expenses and deferred charges	1 207 271	9 46,610
	10a	Land, buildings, and equipment: cost or other		
		basis. Complete Part VI of Schedule D 10a		
	b	Less: accumulated depreciation 10b	1	10c
	11	Investments - publicly traded securities		11
	12	Investments - other securities. See Part IV, line 11		12
	13	Investments - program-related. See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11		15
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16 6,994,583
	17	Accounts payable and accrued expenses		400,782
	18	Grants payable		18
	19	Deferred revenue		19 2,043,867
	20	Tax-exempt bond liabilities		20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
S)	22	Loans and other payables to any current or former officer, director,		
Ĭ		trustee, key employee, creator or founder, substantial contributor, or 35%		
Liabilities		controlled entity or family member of any of these persons		22
_	23	Secured mortgages and notes payable to unrelated third parties		23
	24	Unsecured notes and loans payable to unrelated third parties		644,502
	25	Other liabilities (including federal income tax, payables to related third		
		parties, and other liabilities not included on lines 17-24). Complete Part X		
		of Schedule D		25 2 000 151
	26	Total liabilities. Add lines 17 through 25	5,701,742.	26 3,089,151
s		Organizations that follow FASB ASC 958, check here		
ce		and complete lines 27, 28, 32, and 33.	1 700 630	- 2 005 422
a <u>la</u> r	27	Net assets without donor restrictions		3,905,432
Ö	28	Net assets with donor restrictions		28
Š		Organizations that do not follow FASB ASC 958, check here		
<u>2</u>		and complete lines 29 through 33.		
ţ	29	Capital stock or trust principal, or current funds		29
SSE	30	Paid-in or capital surplus, or land, building, or equipment fund		30
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31 2 005 432
ž	32	Total net assets or fund balances		$\frac{32}{3}$ $\frac{3,905,432}{5,904,593}$
	33	Total liabilities and net assets/fund balances	7,500,380.	33 6,994,583

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	14,27		
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,16		
3	Revenue less expenses. Subtract line 2 from line 1	3	2,10		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,79	<u>8,6</u>	<u>38.</u>
5	Net unrealized gains (losses) on investments	5			
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	3,90	<u>5,4</u>	<u>32.</u>
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:		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2019)

932012 01-20-20

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

**Employer identification number** Name of the organization UNBOUNDED LEARNING, 47-5223320 INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

# 

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
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						
Ŭ	furnished by a governmental unit to						
	the organization without charge						
4	<b>Total.</b> Add lines 1 through 3						
5	The portion of total contributions						
3	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
_	**						
	Public support. Subtract line 5 from line 4.						<u> </u>
	•••	(-) 0045	(1-) 0040	(-) 0047	(4) 0040	(-) 0010	(6) T-1-1
	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
_	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
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	<b>Total support.</b> Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectior	n 501(c)(3)	
	organization, check this box and sto	here					
Sec	ction C. Computation of Publ	c Support Per	centage				
14	Public support percentage for 2019 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	<u>%</u>
	Public support percentage from 2018					15	<u>%</u>
16a	33 1/3% support test - 2019. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				▶□
b	33 1/3% support test - 2018. If the	organization did no	ot check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
17a	10% -facts-and-circumstances test	- 2019. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a ¡	oublicly supported	organization		▶□
b	10% -facts-and-circumstances test	_			-		
	more, and if the organization meets the	_					
	organization meets the "facts-and-circ						<b>▶</b> □
18	Private foundation. If the organization			•			s <b>&gt;</b>
			,,	, , ,, 11 ~		dule A (Form 990	

### 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.)

Se	ction A. Public Support	,, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	1183881.	7967412.	10122431.	7066083.	5294116.	31633923.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	90,000.	3295500.	1915158.	4764725.	8920617.	18986000.
3	Gross receipts from activities that are not an unrelated trade or business 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						
	Total. Add lines 1 through 5	1273881.	11262912.	12037589.	11830808.	14214733.	50619923.
	a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
k	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 12 for the vege.	1183881.	7967412.	10405645.	7115578	3524716.	30197232.
,	amount on line 13 for the year  Add lines 7a and 7b	1183881.		10405645.	7115578.		30197232.
	Public support. (Subtract line 7c from line 6.)	11030011	75071120	101030131	71133701	33217100	20422691.
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6				11830808.		
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	21.	789.	150.	150.	100.	1,210.
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	21.	789.	150.	150.	100.	1,210.
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1272002	4,463.			56,085.	
	Total support. (Add lines 9, 10c, 11, and 12.)			•	11864206.		
14	First five years. If the Form 990 is for	o .		,	•	( ) ( )	, <b>च</b> र
Sec	check this box and stop here ction C. Computation of Publi			•••••		•••••	
	Public support percentage for 2019 (I			column (f))		15	%
16		, (,,	,			16	
	ction D. Computation of Inves					1	70
	Investment income percentage for 20			ne 13, column (f))		17	%
	Investment income percentage from					18	%
	a 33 1/3% support tests - 2019. If the					3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar						<b>.</b> —
k	33 1/3% support tests - 2018. If the	•			•	•	
	line 18 is not more than 33 1/3%, che	ck this box and <b>st</b>	<b>op here.</b> The orga	nization qualifies a	s a publicly suppo	rted organization	▶□
20	Drivate foundation If the organization	n did not chock a	hay an lina 14 10	or 10h chock th	is boy and soo inst	tructions	

Т..

## Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

  If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in 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 in 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 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.)

	Yes	No
1		
2		
3a		
Ja		
2h		
3b		
3с		
4a		
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10a		
10b		

11 Has the organization accepted a gift or contribution from any of the following persons?  a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of an supported organization?  b A family member of a person described in (a) above? If 'Yes' to a.b. or c. provide detail in Part VI.  11b C	Pal	Supporting Organizations (Continued)			
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?  b A family member of a person described in (a) above?  c A 59% controlled with or a special person described in (a) a for (a) bove?  if Yes' to a, b, or c, provide detail in Pert VI.  11b				Yes	No
below, the governing body of a supported organization?  1 A family member of a person described in (a) above?  2. AS\$6 controlled entity of a person described in (a) or (b) above?  3. AS\$6 controlled entity of a person described in (a) or (b) above?  4. Yes 1 to a. b. or c. provide detail in Pert VI.  11b  11c  Section B. Type I Supporting Organizations  1 Did the directors, frustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations directors or trustees at all times during the tax year? If 'No,' observible. If the organization directors or trustees at all times during the tax year? If 'No,' observible. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization and what conditions or restrictors, if any, applied to supple powers during the tax year  2. Did the organization operate for the benefit of any supported organization other than the supported organization and what conditions or estrictors, if any, applied to supple powers during the tax year in Part VI how providing such benefit carried out the purposes of the supported organization (b) that operated, supervised, or controlled the supporting Organizations  1 Were a majority of the organization is directors or trustees during the tax year also a majority of the directors or trustees deach of the organizations apported organization (b) that operated, supervised, or controlled the supported organization (b) that operated, supervised, or controlled the supported organization (b) that operated organization (b) the supported organization (b) the organization or trustees deach of the organization is directors or trustees during the supported organization (b) that was most recently filed as of the date of notification, and (iii) copies	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A family member of a person described in (a) above? If "Yes" to a, b, or c, provide detail in Part VI.  Section B. Type I Supporting Organizations  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations directors or trustees at all times during the tax year? If "Yes" describe in Part VI how the supported organization effectively operated, supervised, or controlled the organization's activities. If the organization and more than one supported organization, describe how the powers to appoint and/or embers delectors or trustees, are allocated omong the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  1 Did the organization operate for the benefit of any supported organization? If "Yes," explain in Part VI how the powers to appoint and/or embers upsopreed organization? If "Yes," explain in Part VI how the powers to appoint acroid remove supported organization? If "Yes," explain in Part VI how providing such benefit carred out the supported organization? If "Yes," explain in Part VI how providing such benefit carred out the supposes of the supported organization? If "Yes," explain in Part VI how control or management of the supporting Organizations  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organization, by the last day of the fifth month of the organization provide to each of its supported organization, to the extent not previously provided?  2 Were any of the organization or the source of the supported organiz	а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
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Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least an najority of the organization's directors or trustees at all times during the tax yea? If "No," describe in Part VI how the supported organization's directors or trustees at all times during the tax yea? If "No," describe in Part VI how the supported organization or extended organization, and the organization and what conditions or restrictions if any, applied to such powers during the tax year.  2. Did the organization operate for the benefit of any supported organization of the thin the supported organization of year to the providing such benefit carried out the purposes of the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization; but no perated.  Section C. Type II Supporting Organizations  1. Were a majority of the organizations directors or trustees during the tax year also a majority of the directors or trustees of each of the organizations or supported organizations? If "Yes," describe in Part VI how control or management of the supporting Organizations and the same persons that controlled or managed.  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 copy of the Form 900 that was most recently filed as of the date of netification, and (ii) copies of the organization's powering documents in effect on the date of netification, to the extent not previously provided?  2. Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's powering documents in effect on the date of netification, to the organization's provided?  2. Were any of the organization is with supported organization's income or assests at all times during the tax year? If "Yes," describe in Part VI how the organization's powering documents in effect on the date of ne			11c		i
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regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization (s) effectively operated, supervised, or controlled the organization's activities. If the organization and more than one supported organization, describe how the powers to appoint another remove directors or trustees were allocated among the supported organization operate for the benefit of any supported organization other than the supported organization operate for the benefit of any supported organization of the trust than the supported organization operate for the benefit of any supported organization of the than the supported organization of the trustees of acts of the organization's directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organizations.  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization's supported organization or unangement of the supporting organization in the same persons that controlled or managed the supported organization's activities of the 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?  2 Were any of the organization's officers, directors, or trustees either (ii) appointed or elected by the supported organization's provided organization's income or assets at all times during the sax year? If "yes," describe in Part VI five role the organizat				Yes	No
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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).  3 By reason of the relationship described in (2), did the organization's supported organization's 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.  Section E. Type III Functionally Integrated Supporting Organizations  1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).  a The organization satisfied the Activities Test. Complete line 2 below.  b The organization is the parent of each of its supported organizations. Complete line 3 below.  c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).  2 Activities Test. Answer (a) and (b) below.  a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the 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 dustantially all of its activities.  b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's position that its 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 position that its supported organization's position that its supported organization			1		
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	h		- Ju		
	~		3b		

Pa	rt V   Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	ov. 20, 1970 (explain in F	Part VI). See instructions. A
	other Type III non-functionally integrated supporting organizations must of	omplete Sec	tions A through E.	
Sect	ion 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	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% 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 .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrated	d Type III supporting orga	nization (see

Schedule A (Form 990 or 990-EZ) 2019

instructions).

Par	TV │ Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations <sub>(continued)</sub>	
Secti	on D - Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
	Breakdown of line 7:			
	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

UNBOUNDED LEARNING, INC.

**Employer identification number** 47-5223320

Par	t I Organizations Maintaining Donor Advised	d Funds or Other	'Si	milar Funds o	r Acc	coun	ts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.					
		(a) Donor adv	ised	funds	(b	) Fund	ds and other accounts
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in $\boldsymbol{\nu}$	vriting that the assets	held	d in donor advised	d funds	3	
	are the organization's property, subject to the organization's e						Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that	grar	nt funds can be us	sed on	ly	
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for	any	other purpose co	onferrin	ng	
Б.	impermissible private benefit?						Yes No
Par				on Form 990, Pa	art IV, I	ine 7.	
1	Purpose(s) of conservation easements held by the organization	-	y).				
	Preservation of land for public use (for example, recreat	tion or education)	_			-	important land area
	Protection of natural habitat	L		Preservation of a	certifi	ed his	toric structure
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation cont	ribut	tion in the form of	a con		•
	day of the tax year.				- 1		Held at the End of the Tax Year
а	Total number of conservation easements				├	2a	
b						2b	
С	Number of conservation easements on a certified historic stru					2c	
d	Number of conservation easements included in (c) acquired a				•		
_	listed in the National Register				L	2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, o	or te	rminated by the o	rganız	ation (	during the tax
_	year >						
4	Number of states where property subject to conservation eas						
5	Does the organization have a written policy regarding the per						
•	violations, and enforcement of the conservation easements it						Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, l	nandling of violations,	, and	enforcing conse	rvation	ease	ments during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violetions, and	onfo	roing concentation	n 000	mont	a during the year
7	S	iling of violations, and	emic	ording conservation	ni ease	emem	s during the year
8	Does each conservation easement reported on line 2(d) above	a catisfy the requirem	onto	of section 170(h)	(4)(D)(i)		
Ü							Yes No
9	and section 170(h)(4)(B)(ii)?						
3	balance sheet, and include, if applicable, the text of the footn						
	organization's accounting for conservation easements.	ote to the organization	1131	manciai statemen	ito tilat	. uesc	TIDES THE
Par	t III Organizations Maintaining Collections of	Art, Historical T	rea	sures, or Oth	er Si	milar	Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		-			
1a	If the organization elected, as permitted under FASB ASC 95		ever	nue statement and	d balar	nce sh	eet works
	of art, historical treasures, or other similar assets held for pub	•					
	service, provide in Part XIII the text of the footnote to its finan	ŕ				•	
b	If the organization elected, as permitted under FASB ASC 956					sheet	works of
	art, historical treasures, or other similar assets held for public						
	provide the following amounts relating to these items:	,	,			•	•
	(i) Revenue included on Form 990, Part VIII, line 1					▶ 5	<b>.</b>
							<u> </u>
2	If the organization received or held works of art, historical trea					rovide	
	the following amounts required to be reported under FASB A				, , , , ,		
а	Revenue included on Form 990, Part VIII, line 1	-				<b>&gt;</b> 5	<b>.</b>
	Assets included in Form 990, Part X					<b>&gt;</b> 9	

932051 10-02-19

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2019

	t III Organizations Maintaining C	ollections of Ar		easures, or O	ther S		Assets			age <b>∠</b>
3	Using the organization's acquisition, accession							(contin	<u>uea)</u>	
3		on, and other record	s, check any or the	Tollowing that the	ake sign	ilicant u	Se oi ils			
	collection items (check all that apply):									
а	Public exhibition	c		change program						
b	Scholarly research	е	e Other							
C	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 o to be sold to raise funds rather than to be ma		•	·				Yes		] No
Par	t IV Escrow and Custodial Arrang									No
· ui	reported an amount on Form 990, Par		ete ii trie organizati	on answered re	S UITC	טפפ ווות	, rait iv, i	irie 9, or		
12	Is the organization an agent, trustee, custodi		iary for contribution	ns or other assets	not inc	luded				
ıa	on Form 990, Part X?							Yes		No
h	If "Yes," explain the arrangement in Part XIII							_ 100		, 110
~	The root, oxplain the arrangement in rail rail.	and complete the for	nowing table.					Amount		
С	Beginning balance					1c		7 11110 01111		
	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo					?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has beer	provided on Par	t XIII .					]
Par										
	·	(a) Current year	(b) Prior year	(c) Two years b		<b>)</b> Three y	ears back	(e) Four	years	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a	a)) held as:						
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment >	%								
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.								
3a	Are there endowment funds not in the posses	ssion of the organiza	ation that are held a	and administered	for the o	organiza	tion			
	by:								Yes	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations							3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza			•				3b		
4	Describe in Part XIII the intended uses of the		wment funds.							
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered									
	Description of property	(a) Cost or o basis (investr		st or other s (other)		umulate eciation	d	(d) Bool	value	<del>)</del>
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment									
	Other									
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X. column (B), line	10c.)						0.

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 UNBOUNDED	LEARNING, INC.	47	-5223320 Page
Part VII Investments - Other Securities.			<u> </u>
Complete if the organization answered "Yes		1b. 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)			
(G)			
(H) Tatal (Col. /h) must equal Form 000. Part V. col. (P) line 12.)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes	s" on Form 000 Part IV line 1	1c Soo Form 000 Part V line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
(1)	(b) Don value	(c)carea er variadrenn e eer er erre	or your market raise
(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	s" on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
(;	a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) li Part X Other Liabilities.	ne 15.)	<b>&gt;</b>	
Complete if the organization answered "Yes	s" on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X 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

Schedule D (Form 990) 2019

(9)

Schedule D (Form 990) 2019 UNBOUNDED LEARNING,			5223320 Page 4
Part XI Reconciliation of Revenue per Audited Financia		per Return.	
Complete if the organization answered "Yes" on Form 990, Pa		1.	14 270 010
1 Total revenue, gains, and other support per audited financial stateme	nts	1	14,270,918
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	00		
a Net unrealized gains (losses) on investments			
b Donated services and use of facilities			
c Recoveries of prior year grants			
d Other (Describe in Part XIII.)		200	0
e Add lines 2a through 2d			14,270,918
<ul><li>3 Subtract line 2e from line 1</li><li>4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:</li></ul>			14,270,010
	4a		
b Other (Describe in Part XIII.) c Add lines 4a and 4b	<u></u>	4c	0
<ul> <li>c Add lines 4a and 4b</li> <li>5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I.</li> </ul>			14,270,918
Part XII Reconciliation of Expenses per Audited Finance	ial Statements With Expense	es per Retur	
Complete if the organization answered "Yes" on Form 990, Pa	•	-	
Total expenses and losses per audited financial statements		1	12,164,124
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			•
a Donated services and use of facilities	2a		
<b>b</b> Prior year adjustments	I		
c Other losses			
d Other (Describe in Part XIII.)	I		
e Add lines 2a through 2d		2e	0 .
3 Subtract line 2e from line 1			12,164,124
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
<b>b</b> Other (Describe in Part XIII.)			
c Add lines 4a and 4b	<u></u>	4c	0 .
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part			12,164,124
Part XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines	1a and 4; Part IV, lines 1b and 2b; Par	t V, line 4; Part	X, line 2; Part XI,
ines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro-	ovide any additional information.		
PART X, LINE 2:			
	<b></b>		
UNBOUNDED LEARNING, INC. IS TAX-EXEMPT	UNDER SECTION 501	(C)(3) O	F THE
			DD THEFT I
INTERNAL REVENUE CODE AND APPLICABLE S	STATE REGULATIONS AD	ND, ACCO.	RDINGLY,
IS EXEMPT FROM FEDERAL AND STATE TAXES	S ON INCOME.		
THE ODGANIZATION HAS BILED FOR AND DEC	SETTED THOOME HAVES	ZEMDET ON	C TN MITE
THE ORGANIZATION HAS FILED FOR AND REC	EIVED INCOME TAX EX	XEMP.L.TON	S IN THE
WADIOUG TUDIODICMIONG WUEDE MUEV ADE I	REQUIRED TO DO CO I		NT 7 3 MT (N)
VARIOUS JURISDICTIONS WHERE THEY ARE F	REQUIRED TO DO SO	I'HE UKGA	NIZATION
FILES FORM 990 TAX RETURNS IN THE U.S.	FEDERAL TURTEDICT	TON AND	TN NEW
FILES FORM 990 IAX RETURNS IN THE 0.5.	FEDERAL CORISDICI	ION AND	TIA IADAA
YORK, CALIFORNIA AND MASSACHUSETTS. TH	TE TAX RETTIRMS FOR T	YEARS EN	DED TIINE
- CILL, CHELL CHALLE IND PRINCHOUSELLO. II			
30, 2017 THROUGH JUNE 30, 2020 ARE ST	LL SUBJECT TO POTE	NTIAL AU	DIT BY THE
		.,	DII DI IIID
IRS AND TAXING AUTHORITIES IN EACH STA			

BELIEVES THEY HAVE NO MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY,

## **SCHEDULE J** (Form 990)

Department of the Treasury

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

Internal Revenue Service Name of the organization

UNBOUNDED LEARNING INC. Employer identification number 47-5223320

OMB No. 1545-0047

Pa	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			37
	The organization?	5a		X
b	Any related organization?	5b		Λ
_	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:	0-		v
	The organization?	6a		X
b	Any related organization?	6b		Λ
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	_		v
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	a		
	Bennanous section 53 4958-bio/	<b>u</b>		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	berients	(B)(i)-(D)	reported as deferred on prior Form 990
(1) LAURA SMITH	(i)	284,124.	0.	0.	4,500.	13,608.	302,232.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KATE GERSON	(i)	323,993.	0.	0.	4,500.	4,029.	332,522.	0.
PRESIDENT AND CEO - THRU JULY 2019	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) LACEY ROBINSON	(i)	296,024.	0.	0.	4,500.	14,799.	315,323.	0.
PRESIDENT AND CEO - AS OF OCT 2019	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) PETER COE	(i)	222,681.	0.	0.	4,500.	27,357.	254,538.	0.
CHIEF ACADEMIC OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) TAYA PAGE	(i)	215,826.	0.	0.	4,500.	21,472.	241,798.	0.
CHIEF PRODUCT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LAKISHA COVERT	(i)	172,598.	0.	0.	4,500.	1,878.	178,976.	0.
EXECUTIVE DIRECTOR, STANDARDS INSTIT	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ANDREA HANCOCK	(i)	181,992.	0.	0.	4,500.	23,666.	210,158.	0.
DEPUTY CHIEF, PROGRAM DESIGN AND DEV	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	175,648.	0.	0.	4,500.	9,243.	189,391.	0.
EXECUTIVE DIRECTOR, PROGRAM AND ENGA	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JASON SCHWEID	(i)	179,072.	0.	0.	4,500.	7,031.	190,603.	0.
EXECUTIVE DIRECTOR, RESEARCH, DESIGN	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### **SCHEDULE 0**

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 **Open to Public** 

Inspection

Name of the organization

UNBOUNDED LEARNING, INC. **Employer identification number** 47-5223320

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MEANINGFUL, ENGAGING, AND AFFIRMING GRADE-LEVEL INSTRUCTION.
MEANINGFUL, ENGAGING, AND AFFIRMING GRADE-LEVEL INSTRUCTION IS THE
RESULT OF COMBINING ANTIRACIST IDEOLOGY WITH CULTURALLY RELEVANT
PEDAGOGY. EVIDENCE OF MEANINGFUL, ENGAGING, AND AFFIRMING GRADE-LEVEL
INSTRUCTION CAN BE FOUND IN:
- TEACHER KNOWLEDGE AND BELIEFS
- TEACHER REFLECTION AND PLANNING ACTIVITIES
- TEACHER ACTIONS IN THE CLASSROOM
- STUDENT LEARNING EXPERIENCES
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
WITH CULTURALLY RELEVANT PEDAGOGY. EVIDENCE OF MEANINGFUL, ENGAGING,
AND AFFIRMING GRADE-LEVEL INSTRUCTION CAN BE FOUND IN:
- TEACHER KNOWLEDGE AND BELIEFS
- TEACHER REFLECTION AND PLANNING ACTIVITIES
- TEACHER ACTIONS IN THE CLASSROOM
- STUDENT LEARNING EXPERIENCES
FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
LAUNCHED THE UNBOUNDED VIRTUAL SUMMIT
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
MODULES - THE UNBOUNDED ASYNCHRONOUS LEARNING MODULES FOCUS ON THE
UNBOUNDED PLANNING PROCESS (UPP). UPP INTRODUCES A DAILY PROCESS FOR
ANALYZING LESSONS TO DEVELOP A CLEAR, FOCUSED LEARNING GOAL, EXPLICIT
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2019)

**Employer identification number** Name of the organization 47-5223320 UNBOUNDED LEARNING, INC. LEARNING STEPS, AND AN INSTRUCTIONAL PLAN THAT SUPPORTS MEANINGFUL, ENGAGING, AND AFFIRMING GRADE-LEVEL LEARNING. THIS FOCUS OF UPP ALLOWS EDUCATORS SHIFT THEIR ATTENTION FROM WHAT STUDENTS ARE DOING TO WHAT STUDENTS ARE LEARNING SO THAT THEY ARE WELL-PREPARED TO TEACH GRADE-LEVEL MATERIAL, AND WHEN REQUIRED, TO SCAFFOLD INSTRUCTION FOR EQUITY. EXPENSES \$ 111,137. INCLUDING GRANTS OF \$ 0. REVENUE \$ 134,000. SPEAKING ENGAGEMENTS - AT UNBOUNDED, OUR THOUGHT LEADERSHIP LIES IN THE INTERSECTION OF THE GRADE-LEVEL STANDARDS, CONTENT KNOWLEDGE, ALIGNED CURRICULUM, AND THE EQUITABLE INSTRUCTIONAL PRACTICES ESSENTIAL FOR CLOSING THE OPPORTUNITY GAP CAUSED BY SYSTEMIC BIAS AND RACISM. WE ALSO BELIEVE THAT WE ARE RESPONSIBLE FOR USING OUR COLLECTIVE VOICE TO SHIFT MINDSETS THAT PROPEL US TO DISMANTLE INEQUITIES WITHIN THE EDUCATION SYSTEM. IT STARTS WITH US CHECKING OUR BELIEFS AND OUR ACTIONS AND HOW THEY'RE AMPLIFIED IN OUR INTENTIONS. IT CONTINUES WITH AN INTENTIONAL FOCUS ON EQUITY INSTEAD OF PERPETUATING THE SYSTEM OF INEQUITABLE EDUCATIONAL OUTCOMES FOR OUR STUDENTS. AND WE'RE HERE TO TALK ABOUT IT. WE OFFER KEYNOTE OPPORTUNITIES FROM LEADERS IN OUR ORGANIZATION. EXPENSES \$ 44,455. INCLUDING GRANTS OF \$ 0. REVENUE \$ 60,950. GRANT FUNDED PROJECTS TO DEVELOP PROFESSIONAL LEARNING PROGRAMS, AND GENERAL OPERATIONS OF THE ORGANIZATION. LEVERAGE GRANT FUNDS TO TARGET EFFECTIVE SERVICES, AND TOOLS FOR SCHOOLS AND DISTRICTS. ALLOWING THE ORGANIZATION TO GAIN INVALUABLE FEEDBACK AS THE RESOURCES ARE MADE AVAILABLE AND USEFUL TO EDUCATORS ACROSS THE COUNTRY. UNBOUNDED ENGAGED IN SEVERAL ROUNDS OF FORMATIVE RESEARCH, BOTH QUALITATIVE AND OUANTITATIVE, TO UNDERSTAND EDUCATOR BEHAVIORS AND PRACTICES RELATED TO Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019) Page 2 **Employer identification number** Name of the organization 47-5223320 UNBOUNDED LEARNING, INC. FINDING, CHOOSING, ADAPTING, AND CREATING CURRICULUM AND TO USING PROFESSIONAL LEARNING RESOURCES. EXPENSES \$ 70,411. INCLUDING GRANTS OF \$ 0. REVENUE \$ 104,745. FORM 990, PART VI, SECTION B, LINE 11B: THE 990 WILL BE PROVIDED TO THE TRUSTEES PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: IT IS THE PURPOSE OF THE FINANCIAL POLICY AND PROCEDURES DOCUMENT TO ENCOURAGE TRUSTEES, OFFICERS OR EMPLOYEES TO REPORT INFORMATION THAT THEY REASONABLY AND IN GOOD FAITH BELIEVE TO BE IN VIOLATION OF THE CODE OF BUSINESS CONDUCT, THE POLICY ON CONFLICT OF INTEREST AND RELATED PARTY TRANSACTION POLICY, APPLICABLE LAW OR REGULATION, TO A MEMBER OF THE BOARD OF TRUSTEES, IN WRITING STATING IN DETAIL THE BASIS FOR BELIEF OF THE VIOLATION OR SUSPECTED VIOLATION. FORM 990, PART VI, SECTION B, LINE 15: THE INDEPENDENT DIRECTORS OF THE BOARD REVIEW AND APPROVE CEO COMPENSATION. THE CEO REVIEWS AND APPROVES COMPENSATION OF THE CORPORATION'S KEY AND HIGHLY PAID EMPLOYEES AND INDEPENDENT CONTRACTORS. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: NY, MA, OK, WA, CA, AR, CO, ID, LA, MD, MI, TX, TN 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.