EXTENDED TO FEBRUARY 16, 2016

Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 Open to Public

Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection A For the 2014 calendar year, or tax year beginning JUL 1, 2014 C Name of organization D Employer identification number Check if Address THINK SMALL Name 41-1260581 Doing business as Initial Number and street (or P.O. box if mall is not delivered to street address) Room/suite E Telephone number Final 10 YORKTON COURT 651-641-0305 termi G Gross receipts \$ 25,169,314. City or town, state or province, country, and ZIP or foreign postal code Amended SAINT PAUL, MN 55117 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: BARBARA YATES for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) ___ 501(c) () ◀ (insert no.) 4947(a)(1) or L 527 If "No," attach a list. (see instructions) J Website: WWW.THINKSMALL.ORG H(c) Group exemption number ▶ L Year of formation: 1975 M State of legal domicile; MN K Form of organization: X Corporation Trust Association Other > Part I Summary Briefly describe the organization's mission or most significant activities; TO ADVANCE QUALITY CARE AND Governance EDUCATION OF CHILDREN IN THEIR CRUCIAL EARLY YEARS. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 19 Number of voting members of the governing body (Part VI, line 1a) 19 Number of independent voting members of the governing body (Part VI, line 1b) Activities & 119 5 Total number of Individuals employed in calendar year 2014 (Part V, line 2a) 5 128 6 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year 17,117,049 21,130,060. Contributions and grants (Part VIII, line 1h) 489,970 507,612. Program service revenue (Part VIII, line 2g) 2,095. 4.200. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2,090,646. 2,366,344. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 24,008,216. 19,699,760. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) 11,655,176 15,163,266. 14 Benefits paid to or for members (Part IX, column (A), line 4) 4,477,846. 4,986,584. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) 3,574,734 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,634,804. 23,784,654. 19,707,756. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -7,996.223,562. 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 11,367,785. 6,920,127. 11,176,921. 20 Total assets (Part X, line 16) 6,974,281 21 Total liabilities (Part X, line 26) 4,202,640. 4,447,658. 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 Sign BARBARA YATES, PRESIDENT & CEO Here Type or print name and title Milia Print/Type preparer's name 11.13.1 CHRISTINE OLSEN P01591802 Paid Firm's name CLIFTONLARSONALLEN LLP 41-0746749 Preparer Firm's EIN Firm's address 220 SOUTH SIXTH STREET, SUITE 300 Use Only Phone no.612-376-4500 MINNEAPOLIS, MN 55402

May the IRS discuss this return with the preparer shown above? (see instructions)

Form		260581	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	*********	X
1	Briefly describe the organization's mission: TO ADVANCE QUALITY CARE AND EDUCATION OF CHILDREN IN THEIR CI	RUCIAL	
	EARLY YEARS.	, ,,,,	
2	Did the organization undertake any significant program services during the year which were not listed on	Vac	X No
	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	L_1es	LZZ INO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
3	If "Yes," describe these changes on Schedule O.	103	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	d by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the tot		
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 17,139,098. including grants of \$ 15,103,750.) (Revenue \$		0.)
	SCHOLARSHIPS AND OTHER FINANCIAL SUPPORTS: THINK SMALL SERVES	S PROVII	DERS
	AND FAMILIES WITH TARGETED FINANCIAL SUPPORTS. THINK SMALL A		ERS
	NEARLY 4,500 ELIGIBILITY-BASED SCHOLARSHIPS FOR FAMILIES TO		
	CHILDREN IN PROGRAMS WITH PARENT AWARE QUALITY RATINGS. WE A		ER
	BASIC SLIDING FEE CHILD CARE ASSISTANCE FOR ELIGIBLE LOW-INCO	OME	
	FAMILIES IN RAMSEY COUNTY. WE CONNECT PROVIDERS WITH QUALITY	DDOGDAI	W.C.
	IMPROVEMENT GRANTS AND EMERGENCY FUNDING FOR EARLY CHILDHOOD	PROGRAM	12·
	The state of the s		
4b	(Code:) (Expenses \$ 2,304,571. including grants of \$ 57,138.) (Revenue \$	439,2	283.)
	PROFESSIONAL DEVELOPMENT, CONSULTATION, AND COACHING: THINK S	SMALL	
	PROVIDES METRO-WIDE PROFESSIONAL DEVELOPMENT OPPORTUNITIES FO	OCUSED (ON
	THE ESSENTIAL ELEMENTS OF HIGH QUALITY CARE. OPPORTUNITIES II	NCLUDE:	
		OMALI,	
	OROMO, AMHARIC, AND KAREN; INDIVIDUAL AND SITE-BASED CONSULTA		
	COACHING SUPPORT; BUSINESS SUPPORT TO HELP MAINTAIN SUCCESSFU		
	CARE BUSINESSES; AND CAREER GUIDANCE FOR CERTIFICATION AND L	ICENSING	J
4c	(Code:) (Expenses \$ 2,092,134 · including grants of \$ 0 ·) (Revenue \$	2,400,0	008.1
40	PUBLISHING: A LEADING PUBLISHER OF CURRICULUM, MANAGEMENT, PI		
	DEVELOPMENT, AND BUSINESS RESOURCES FOR ADULTS WHO CARE FOR,		
	NURTURE YOUNG CHILDREN, REDLEAF PRESS PUBLISHES ON A BROAD RE		
	TOPICS. THESE PRODUCTS ARE DESIGNED TO ASSIST EARLY CHILDHOOD		
	PROFESSIONALS IN USING STIMULATING, CHILD-CENTERED PRACTICES	BASED (ИС
	SOUND AND PROVEN THEORY ABOUT LEARNING AND CHILD DEVELOPMENT		AF
	PUBLISHES BETWEEN 24 AND 30 NEW TITLES A YEAR AND HAS MORE TI		,
	TITLES IN PRINT. APPROXIMATELY 183,000 PRODUCTS ARE DISTRIBU		
	ANNUALLY TO CUSTOMERS BOTH IN THE U.S. AND ABROAD. REDLEAF BO		E
	TRANSLATED INTO 19 DIFFERENT LANGUAGES, WITH OVER 40 BOOKS II		
	TRANSLATION. OVER 50% OF TITLES HAVE BEEN CONVERTED INTO E-BO		
	OTHER DIGITAL FORMATS. REDLEAF PRESS BOOKS ARE BEING USED IN	MORE TH	HAN
4d	Other program services (Describe in Schedule O.)	0.0	
		96.)	
<u>4e</u>	Total program service expenses ▶ 22,541,372.	O(90 (2014)
43200 11-07-		rom 9	(2014)

Form 990 (2014) THINK SMALL Part IV Checklist of Required Schedules

No
х
х
X
x
X
x
х
х
X
_
-
х
X
X
X
X
x
x
X
X
014)

Form 990 (2014) THINK SMALL

Part IV Checklist of Required Schedules (continued)

			Yes	No
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	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		\ \r	
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			Х
	Schedule K. If "No", go to line 25a	24a 24b		71
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С		24c		
4	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L., Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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		15.4.41 . - 1 _{2.11}	21 2 2 11 21 11 12
	instructions for applicable filing thresholds, conditions, and exceptions):	111.		1
a		28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Λ
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			x
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		- 21
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	-		
	Schedule N, Part II	32		Х
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
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			7.7
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	х	
-	Note. All Form 990 filers are required to complete Schedule O	38	990	(0.01.4)

Part V	Statements	Regarding	Other IRS	Filings and	Tax Compliance	_
--------	------------	-----------	-----------	-------------	----------------	---

	Check if Schedule O contains a response or note to any line in this Part V		mannananana.		17.3	LNG
18	Enter the number reported in Box 3 of Form 1095. Enter -0- if not applicable	1 ta 1	264		Yes	No
t		16	0	100	111	1976
c		reportab	le gaming	1c	gath.	(A) 4 (100 ()
28		2a	119	11		100
ь				2b	X	19.1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	lai		14.11	1	15.11
За				За	8 1	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	9 O		3b		-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority	v over, a	- 0.2		
	financial account in a foreign country (such as a bank account, securities account, or other financial if "Yes," enter the name of the foreign country:	account)?	4a	- 200	х
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	A	VICES A DO	13	1	1
5a	Was the organization a party to a prohibited tay shalter transaction of any time disclaration of	Accounts	(FBAR).		Notice:	v
b	the same and the s		**************	5a		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	action (****************	5b		Δ
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to		Franklan - alfalk	5c	-	-
-	any contributions that were not tax deductible as charitable contributions?	ne organ	ization solicit	0-		х
b		tlane or e	diffe	6a		Δ
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).		***************************************	11.75	21.1 5.5	0.45
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices pro	vided to the payor?	7a		х
b	if "Yes," did the organization notify the donor of the value of the goods or services provided?		Total In the Property	7b		
C		vas reduir	ed	-,~		
	to file Form 8282?	(145 (254)		7c	. 21	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		Sec. or	Wito.	#100 L
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?	Address made broad	7e		X
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8899	as required?	7g		10.0
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file	a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by the		300	1.1.1	110
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.			10 15	20 M	77-
a	Did the sponsoring organization make any taxable distributions under section 4966?		**********	9a		
Ю	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	**********	mmeniminana.	96		
	Initiation fees and capital contributions included on Part VIII, line 12	140-1		11 44	80.11	15
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a	-	0.11	1.81	117
11	Section 501(c)(12) organizations. Enter:	100		Jacks B	1126 6 11	
a	Gross income from members or shareholders	11a		1110	9.6/6	211
ь	Gross income from other sources (Do not net amounts due or paid to other sources against	1.0		317	Sale	100
	amounts due or received from them.)	116		1011	111	4144
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		-	12a	-/ 2000	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		830	0544	482]
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			0.13		
a	Is the organization licensed to issue qualified health plans in more than one state?			13a	8.0	
	Note. See the instructions for additional information the organization must report on Schedule O.			HAT S	Dig.	121
b	Enter the amount of reserves the organization is required to maintain by the states in which the			10 11	a gir	3,03
	organization is licensed to issue qualified health plans	13b			1	12.10
c	Enter the amount of reserves on hand	13c		min (inhii	54
4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	e O		14b		
				Form	990 (2014)

THINK SMALL 41-1260581 Form 990 (2014) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions, X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Ves 19 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 19 b Enter the number of voting members included in line 1a, above, who are independent ______ Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a b Each committee with authority to act on behalf of the governing body? X 86 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? X 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10h 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? X Did the organization have a written document retention and destruction policy? 14 14 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? X a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b 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 .23 taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►MN Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public Inspection, indicate how you made these available. Check all that apply. X Upon request X Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: KRISTEN HARINEN - 651-641-6620

55117

10 YORKTON COURT, ST PAUL, MN

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				n e than	one th an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Indehidual trostes or director	furthuforal trustee	Officer	Кеу етрісуве	Highest compensated smployee	Former	the organization	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) ROB GRUNEWALD	1.00	6		5					12		
CHAIR	1 00	X		X				0.	0.	0.	
(2) ANN HILL	1.00	**		22							
VICE CHAIR	1 00	X		X	_	-	-	0.	0.	0.	
(3) SUNTER SAKLAD SECRETARY	1.00	x		x				0.	0.	0.	
(4) JERRI FREIER	1.00	-				1					
TREASURER		x		x				0.	0.	0.	
(5) ELAINE BIRKEMEYER	1.00								-		
DIRECTOR		X						0.	0.	0.	
(6) JIM BOYLE	1.00						-	1			
DIRECTOR		X						0.	0.	0.	
(7) JACQUELINE CROSS	1.00	139							5.1	0.0	
DIRECTOR		X						0.	0.	0.	
(B) MARK CROSS	1.00	1								6-	
DIRECTOR	1 00	X					_	0.	0.	0.	
(9) BARBARA FABRE	1.00	x	60					0	0	6	
DIRECTOR (10) MATT GROSE	1.00	Λ	_			-		0.	0.	0.	
DIRECTOR	1.00	х					Н	0.	0.	0.	
(11) H. B. HAYDEN JR	1.00	ZX		-	-	-	_	0.	۷.	0.	
DIRECTOR	2,700	x						0.	0.	0.	
(12) MARSHALL JOHNSON	1.00	-		_				***			
DIRECTOR		X	Ų.		4.			0.	0.	0.	
(13) ROBBIN JOHNSON	1.00	111									
DIRECTOR	Paris (X				L.		0.	0.	0.	
(14) MARK LOFTHUS	1.00	5.1							J.	4.	
DIRECTOR	1 00	X						0.	0.	0.	
(15) MARIAM MOHAMED	1.00										
DIRECTOR (16) KATE NOBLE	1.00	X	-	-	-	-		0.	0.	0.	
DIRECTOR	1.00	х						0.	0.	0.	
(17) JODI SANDFORT	1.00	27						0.	0.	0.	
DIRECTOR	1.00	x				117		0.	0.	0.	
432007 11-07-14			_	_	_			9.1		Form 990 (2014)	

432007 11-07-14

Part VII Section A. Officers, Directors, True	stees, Key Em	ploy	yees	, an	d Hi	ighe	st (Compensated Employe	es (continued)		
(A) Name and title	(B) Average hours per week	(do		Pos heck ss pe	c) itior more erson	1 than is bol	one th an	(D) Reportable compensation	(E) Reportable compensatio	n	(F) Estimated amount of
	(list any hours for related organizations below line)	lee or director	Institutional trustee	Officer		Highest compensated employee		the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	S	other compensation from the organization and related organizations
(18) RHODA REDLEAF	0.00			_	_				P. William		_
DIRECTOR EMERITUS	0.00	X		_	_	_		0.		0.	0
(19) MARY ANN BARROWS WARK DIRECTOR EMERITUS	0.00	x						0.		0.	0
(20) BARBARA YATES	50.00	^	\vdash		-	├		0.		0.	U
PRESIDENT AND CEO	30.00	1		х		ĺ		169,809.		0.	21,737
(21) KRISTEN HARINEN	40.00						<u> </u>	20370031			
DIRECTOR OF FINANCE		1		X				77,526.		0.	8,908
(22) TODD OTIS	40.00								· ·		
CHIEF ADVANCEMENT OFFICER,						Х		109,044.		0.	12,291
(23) RAY ABOYAN CHIEF OPERATING OFFICER	40.00					х		126,345.		0.	25,025
									12370		,
									. 17.000		***
		_									,
1b Sub-total		L				1		482,724.		0.	67,961
c Total from continuation sheets to Part V	II. Section A						•	0.		0.	0
d Total (add lines 1b and 1c)								482,724.		0.	67,961
2 Total number of individuals (including but r							no r	ecelved more than \$100	,000 of reportabl	е	=
compensation from the organization											Yes No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s											3 X
4 For any individual listed on line 1a, is the sa											T
and related organizations greater than \$15											4 X
5 Did any person listed on line 1a receive or	accrue comper	nsati	ion f	rom	any	unr	elat	ed organization or indiv	idual for services		5 X
rendered to the organization? If "Yes," com Section B. Independent Contractors	ipiete Scheaul	e <i>J</i> 10	OF SL	icn j	pers	on .		<u></u>			5 X
Complete this table for your five highest co	mpensated inc	depe	ende	nt c	ontr	acto	ors t	that received more than	\$100,000 of com	pens	ation from
the organization. Report compensation for	the calendar y	ear e	endi	ng w	vith (or w	ithir	n the organization's tax	year.		
(A) Name and business								(B) Description of s	ervices	С	(C) ompensation
QUADGRAPHICS, N61 W23044 SUSSEX, WI 53089-3995	HARRYS	WZ	ΑY,					PRINTING SER	VICES		244,068
VERSA PRESS INC., 1465 SEE EAST PEORIA, IL 61611-97		YΥ	RC	AI),			PRINTING SER	VICES		223,007
	ਡ <i>ਾ</i> ਨ										
<u> </u>										Ī	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100.000 of compensation from the organization
2

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (B) (A) Related or Total revenue Unrelated exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations e Government grants (contributions) 19,945,524 1e f All other contributions, gifts, grants, and similar amounts not included above 1,184,536 60, g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f 21,130,060 **Business Code** PROGRAM SERVICE FEES Program Service Revenue 624410 435,606 435,606 OTHER PROGRAM REVENUE 900099 72,006 72,006 f All other program service revenue 507,612 Total, Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 4,200 4,200. Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ ___ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 3,493,373 b Less: cost of goods sold 1,161,098 2,332,275 2,332,275 Net Income or (loss) from sales of inventory Miscellaneous Revenue Business Code MISCELLANEOUS REVENUE 900099 34,069 11 a 34,069. d All other revenue e Total. Add lines 11a-11d 34,069. Total revenue. See instructions. 24,008,216. 2,839,887 0. 38,269. 432009 11-07-14 Form 990 (2014)

Part IX Statement of Functional Expenses

	lon 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respo				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
1	Grants and other assistance to domestic organizations	45 460 066	45 460 066	u bestă ji take ji 27,11	etgy filmos - j f
	and domestic governments. See Part IV, line 21	15,163,266.	15,163,266.	10 10 10 PHYS 1.40	. The Shift procedure of
2	Grants and other assistance to domestic			75 No (11 No) 1 Hs	
2	individuals. See Part IV, line 22			LESCO DE CONTRE SE	A did both and an
3	Grants and other assistance to foreign			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	organizations, foreign governments, and foreign				
4	Individuals. See Part IV, lines 15 and 16 Benefits paid to or for members				Table on Merchan
5	Compensation of current officers, directors,				
	trustees, and key employees	564,715.	270,451.	185,928.	108,336.
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	3,629,419.	3,115,068.	376,913.	137,438.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	100,711.	95,789.	4,869. 19,890.	53.
9	Other employee benefits	384,992.	359,805.	19,890.	5,297.
10	Payroll taxes	306,747.	251,617.	38,366.	16,764.
11	Fees for services (non-employees):				
a	Management				
b	Legal	6,175.	468.	5,707.	
C	Accounting	20,244.	8,000.	12,244.	
d	The state of the s				
e	Professional fundraising services. See Part IV, line 17	F 300	AND A LANGUAGUET TO	F 300	
1	Investment management fees	5,380.		5,380.	
g	그래, 하나가 하는 게임하다 사람이 보고 있다면 그래, 그 사람이 사람들이 걸리고 하나 이번 보고를 가입하게 되었다면 하다.	1,227,397.	1,164,725.	58,486.	4,186.
dia.	column (A) amount, list line 11g expenses on Sch O.)	415,226.	409,718.	4,849.	659.
12	Advertising and promotion	735,063.	702,563.	22,031.	10,469.
13	Office expenses	175,437.	89,820.	80,267.	5,350.
14	Information technology	175/15/1	05,020.	00,1011	3,330.
16	Royalties	322,130.	300,251.	16,000.	5,879.
17	Occupancy	106,487.	85,979.	18,757.	1,751.
18	Payments of travel or entertainment expenses		214575		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	45,080.	32,790.	12,090.	200.
20	Interest	18,161.	15,544.	1,975.	642.
21	Payments to affiliates	3.30 1132		1.000	2 V 2 P V
22	Depreciation, depletion, and amortization	428,066.	387,831.	33,683.	6,552.
23	Insurance	52,954.	27,597.	24,313.	1,044.
24	Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e, If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)		Service Control of the Control of th		
a	CREDIT CARD/BANK FEES	51,898.	43,222.	8,079.	597.
ь	BAD DEBT EXPENSE	13,982.	12,932.	1,045.	5.
c	SUBSCRIPTIONS AND DUES	6,133.	3,420.	2,673.	40.
d	MISCELLANEOUS	4,991.	516.	4,445.	30.
e	All other expenses				
25	Total functional expenses, Add lines 1 through 24e	23,784,654.	22,541,372.	937,990.	305,292.
26	Joint costs, Complete this line only if the organization	100		W-W	
	reported in column (B) joint costs from a combined				
	educational campaign and fundralsing solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				Form 990 (2014)

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year 490,371. Cash - non-interest-bearing 411,013. 2,322,283. Savings and temporary cash investments 415,177. 2 318,604. Pledges and grants receivable, net 66,494. 3 3 3,713,101. 5,216,656. Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L Notes and loans receivable, net 7 577,255. 633,766. Inventories for sale or use 8 209,512. 201,247. Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 3,824,699. basis. Complete Part VI of Schedule D 10a 2,354,493. 1,470,206. 1,635,718. 100 585,862. 690,129. 11 Investments - publicly traded securities 11 759,301. 670,969. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 17,753. 1,030,070. 15,412. 1,093,807. 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 11,176,921. 11,367,785. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 5,194,113. 3,879,276. Accounts payable and accrued expenses 17 17 18 Grants payable 18 1,344,202. 2,625,769. Deferred revenue 19 19 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 435,966. 415,082. 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 Total liabilities. Add lines 17 through 25 6,974,281. 6,920,127. 26 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 3,740,182. 3,943,198. Unrestricted net assets 27 462,458. 504,460. Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 4,202,640. 4,447,658. 33 Total net assets or fund balances 33

11,367,785.

11,176,921.

34

Total liabilities and net assets/fund balances ...

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.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1645-0047

2014

Open to Public Inspection

Name of the organization Employer identification number THINK SMALL 41-1260581 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, 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.) 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, 4 city, and state: 5 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)(lv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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 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). 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving 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. d 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 III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported iv) is the organization (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your governing document? (described on lines 1-9 organization support (see other support (see above or IRC section Instructions) Instructions) (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 THINK SMALL 41-1260581 Page 2
Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

_	ction A. Public Support	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not	Mackel	6,955,864.	7,247,407.	17,117,049.	21,130,060.	58,957,972.
2	include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	6,507,592,	0,955,864.	7,247,407.	17,117,049.	21,130,060.	38,357,372.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	6,507,592.	6,955,864.	7,247,407.	17,117,049.	21,130,060.	58,957,972.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11,		17 15 2 2 1 3 5 1				
	column (f)	State of Second			Janus Brahn menenga I Kalentarakan		58,957,972,
	Public support. Subtract line 5 from line 4.	70-922-214 (400)	CONTRACTOR .	V-1-1 000	A1 7:1-10 LA	300 2 1 1 P 1 P	58,957,972,
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	6,507,592.	6,955,864.	7,247,407.	17,117,049.	21,130,060.	58,957,972.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,635.	2,116.	647.	2,095.	4,200.	14,693.
9	Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain						
10	or loss from the sale of capital assets (Explain in Part VI.)	14,277.	3,004.	9,472.	43,367.	34,069.	104,189.
11	Total support. Add lines 7 through 10		Fri Till Su like of h		Albert Hebrer	Christian a way	59,076,854.
	Gross receipts from related activities, First five years. If the Form 990 is for	the organization's	first, second, third		x year as a sectio	n 501(c)(3)	,726,099.
Sec	organization, check this box and stop ction C. Computation of Publi	c Support Per	centage	<u> </u>	***************************************		
14	Public support percentage for 2014 (II Public support percentage from 2013	ine 6, column (f) div	ided by line 11, co	lumn (f))	*************	14 15	99.80 % 99.36 %
16a	33 1/3% support test - 2014. If the o stop here. The organization qualifies a 33 1/3% support test - 2013. If the o and stop here. The organization quali	rganization did not as a publicly suppo rganization did not	check the box on rted organization check a box on lin	line 13, and line 1 e 13 or 16a, and	4 is 33 1/3% or n line 15 is 33 1/3%	or more, check th	nis box
17a	10% -facts-and-circumstances test and if the organization meets the "fact meets the "facts-and-circumstances"	: - 2014. If the orga ts-and-circumstanc	nization did not ch es" test, check thi:	eck a box on line s box and stop he	13, 16a, or 16b, a ere. Explain in Par	and line 14 is 10% t VI how the organ	or more, nization
b	10% -facts-and-circumstances test more, and if the organization meets th organization meets the "facts-and-circ	e "facts-and-circum	nstances" test, che	eck this box and s	top here. Explain	In Part VI how the	
	Private foundation. If the organization						

Schedule A (Form 990 or 990 EZ) 2014 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Se	ction A. Public Support	low, piease com	piete r arr ii.j				
-	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						MASSI
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and				-		
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 5.)		Stank Clarent	DESCRIPTION OF THE PERSON	g beingspelie in	Professional designation (
	tion B. Total Support						
Gale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	776			111111111111111111111111111111111111111	1,7 = 1,7	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	V					
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	an contract of the	M	1.91	AND A COLUMN TO A STATE OF	WE 14 14-1	tu.
	First five years. If the Form 990 is for the						
200	check this box and stop heretion C. Computation of Public	Support Po	reentage		***********		
				alcies a ZON		7.61	
10	Public support percentage for 2014 (line	shadula A. Dart	M lies 15	olumn (1))		15	9/6
	Public support percentage from 2013 S tion D. Computation of Invest			***************************************		16	%
_				- 10		Lat	
17	Investment income percentage for 2014	f (line 100, colun	nn (i) divided by lin	e 13, column (f))		17	%
	Investment Income percentage from 20					18	%
	33 1/3% support tests - 2014. If the or						
	more than 33 1/3%, check this box and						
	33 1/3% support tests - 2013. If the or						
	line 18 is not more than 33 1/3%, check Private foundation. If the organization of						
.0	rivate roundation. It the organization t	and mor driedk a	DUX OIT III IE 14, 198	, or rab, check th	is dox and see if	sudduons	

(Complete only If you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)		_	
Sec	tion A. All Supporting Organizations			
		1	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in part y how the supported organizations are designated. If designated by			
2	class or purpose, describe the designation. If historic and continuing relationship, explain. 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	1.	100	
За	organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	2	1 8	000
	(b) and (c) below.	За	100 0	100.71
Ь	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.	3b	0 1	11 11
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.	3c	715.5	File
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
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.	4b	1. Tr - 18 1	125
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.	4c	10 mm	
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).	5a		
ь	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?	5b	11(1)	
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		jii is
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).	8	Fij is	-lig
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.	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in part VI.	9b	ilin.	
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit	a 9 121	lani, s	,tid
l0a	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in part VI. Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting	9c	1075 1177	1
b	organizations)? If "Yes," answer (b) below. Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10a	11-10	Toll

determine whether the organization had excess business holdings.)

3a

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in part vi, the role played by the organization in this regard.

1	L Check here if the organization satisfied the Integral Part Test as a qualifyin other Type III non-functionally Integrated supporting organizations must be	and the second	이 아이들은 얼마나 아래에 가는 것이 아니는 것이 없는 것이 없었다.	ctions. All
Sect	tion 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	D 1175		
_	instructions for short tax year or assets held for part of year):	7,000	THE PERSON NAMED IN COLUMN	Lawyer Carlot March 19
	Average monthly value of securities	1a		
b	Average monthly cash balances	16		
C	Fair market value of other non-exempt-use assets	10		
d	Total (add lines 1a, 1b, and 1c)	1d		
0	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		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	Carrier and the Carrier	
2	Enter 85% of line 1	2	is a market in and uning the date	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	personal personal principal	
4	Enter greater of line 2 or line 3	4	To the survival and a rich (1900)	
5	Income tax imposed in prior year	5)ydodomy & myl Ne l il	
6	Distributable Amount, Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions) Check here if the current year is the organization's first as a non-functional	6		

Schedule A (Form 990 or 990-EZ) 2014

Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex-		17.07120	
2	Amounts paid to perform activity that directly furthers exem organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	าธ	*	
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 (provide details in Part VI). See instructions.	the organization is responsiv	e	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
10	Ento 9 attributin divides by altre 9 attributin	(i)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6	alia Cambille (Anariyalen)	se in June 1 And Helpin	
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:	Children San High Sellings of	in the constraint of the contract of the contr	
а	S = 2 (2000) R D25 2 (S of the trap to project their region and Settle	Sand Super to the beatings of our	Tests the deep the population of	7-G-17-G-18-S-18-S-18-S-18-S
b		with the control of the by the driver	and of market production of the	Charles of the percent of the Man
c	<u> THE PROPERTY OF A COMMON FOR A SECTION OF </u>	the large side for the		I Desperation of the Section of the
d	Property and the control of the cont			
_	From 2013		Sandalahakersa	
		A process to be a second distribution	maj Audumaj are general	entralic territoria del propertoria
f	Total of lines 3a through e	er wareanstroom research	protection of the second contract	
	Applied to underdistributions of prior years	or to the Cooks (not at the spin and a sub- tragger on property company of a subsequent		and plant property felt
	Applied to 2014 distributable amount	Committee of the control of the cont	and the fit of the first of the probabilities of the fit	[27]];;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
i	Carryover from 2009 not applied (see instructions)	as a bar de cobil as a helite (nde arb)	at afrai star atministration in income	Contract to the second second second
1	Remainder, Subtract lines 3g, 3h, and 3l from 3f.	Agripton on hear or suggestions		part that water the beginning to
4	Distributions for 2014 from Section D, line 7: \$	of the process was also and the control of the cont		
a	Applied to underdistributions of prior years	Cod Latencia 11 La Pelatodale		Shirt in the second
b	Applied to 2014 distributable amount		A tem Local of Male and Fresh Ad	
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount	en hinken for follow, a francisco e e , e e francisco for advances (e fra forma e for for for foreign e e forma e for for foreign e		
_	greater than zero, see instructions).	the state of the s		Evaluation combine special 1983
6	Remaining underdistributions for 2014. Subtract fines 3h and 4b from line 1 (If amount greater than zero, see instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:	a poz ia aringarii yas pina oo gi	وواردانا بربانا سودونية	
а	16 C. P. 18 Oct. Sattle Designates, Special graphs of proceedings of Special	rajeculari a eri gulaz iraniyar i	All per manufacture to trige	
ь	Account the contract of the state of the contract of the contr	ร มาย (วายงนาคร ปกไป (ม.มาโก)	The art of the purine details	The late of the la
C	Talle Legistra Maria pagasa Jaka sajara	in Life Search and the copyright.	negar a grafi murdin unimbrigin	
	Excess from 2013	del monimum sin pain moniminate ad	a point, or only in graph desired of	of burking a supplied out of a second
_	Excess from 2014	pak mining liping dan din din Kal Pap palining liping dan din gipi	Marketin gorphic grant (and PR	anning condition of the Silver

Schedule A (Form 990 or 990-EZ) 2014

CHEDULE	A,	PART	II,	LINE	10,	EXPLANATION	FOR	OTHER	INCOME:
ISCELLAN		450	1407	7777		Design to the second			
LOCILLIZA	HO	,,,							
***	-					-			
		_							
							-		
	-				-				
		-			-000-				
	_								
		-							
			-		ميتحث				
						and the second second			
									100110000000000000000000000000000000000
	-							-	
				-	-				

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Name of the organization

Employer identification number

	THINK SMALL	41-1260581
Organization type (che	ack one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
0		
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	ion is covered by the General Rule or a Special Rule.	Id Duly Co. In Id
Note. Only a section so	01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	ial Hule. See instructions.
General Rule		
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a contrib	
Special Rules		
sections 509(a any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sup a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, butor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the a D-EZ, line 1. Complete Parts I and II.	16a, or 16b, and that received from
year, total cont	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received tributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or of cruelty to children or animals. Complete Parts I, II, and III.	
year, contributi is checked, ent purpose. Do no	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received to the second sections exclusively for religious, charitable, etc., purposes, but no such contributions total ter here the total contributions that were received during the year for an exclusively religed to the total contributions that were received during the year for an exclusively religed to the parts unless the General Rule applies to this organization becautable, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000. If this box glous, charitable, etc., use it received <i>nonexclusively</i>
but it must answer "No"	on that is not covered by the General Rule and/or the Special Rules does not file Sched on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on neet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	
III Es Branco Ba	Control of the Contro	Tule B (Farm DDC DOG ET as DOG DE) (DDC 4)

Name of organization	Employer Identification number
THINK SMALL	41-1260581

THINK	SMALL	43	-1260581
Part I	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	41	\$\$,	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 627,521.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$, 3,158,284.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$	Person Payroll Complete Part II for noncash contributions.)

423452 11-05-14

Employer identification number

Part II	Noncash Property (see Instructions) Lies duclingto copies of	The state of the s	1260581
arc arack	Noncash Property (see Instructions). Use duplicate copies of	-art II if additional space is needed.	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see Instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule B	(Form 990, 990-EZ, or 990-PF) (2014)		·	Page 4 Employer identification number
Name of orga	nization			Employer facilities from mainter
THINK Part III	Exclusively religious, charitable, etc., contine year from any one contributor. Complete completing Part III, enter the total of exclusively religion	is, charitable, etc., contributions of \$1,000 o	in section 501(a)(7), (8), or wing line entry. For organization r less for the year (Enterthis inlo. ence	411260581 (10) that total more than \$1,000 for ► \$
(a) No.	Use duplicate copies of Part III if addition			A CLEAN AND THE REAL PROPERTY.
from Part !	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gif		
	Transferee's name, address, a	- National Control of the Control of		nsferor to transferee
(a) No.		to Man of with	(d) Dece	viotics of how cittle hold
Part I	(b) Purpose of gift	(c) Use of gift	(a) Desc	ription of how gift is held
		(e) Transfer of gif	t	
	Transferee's name, address, a	nd ZIP + 4	Relationship of trai	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, a	(e) Transfer of gif		nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, a	(e) Transfer of gif		nsferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

2014

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbylng Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	parate instructions), then 501(c)(4), (5), or (6) organizatio	ns: Complete Part III			
Name of orga	anization	Z X Z Z Z Z	3H-3	En	nployer identification number
Part I-A	THINK SM	Aப்ப nization is exempt und	der section 501/	dorie a section 527	41-1260581
1 Provide 2 Political	a description of the organizate expenditures er hours	ion's direct and indirect politi	cal campaign activitie	s in Part IV.	. 0.
Part I-B	Complete if the orga	nization is exempt und	der section 501/c	1/3/	
1 Enter th 2 Enter th 3 If the or 4a Was a c	e amount of any excise tax in e amount of any excise tax in- ganization incurred a section correction made? describe in Part IV. Complete if the orga	curred by the organization un curred by organization manag 4955 tax, did it tile Form 4720	der section 4955 gers under section 499 of for this year?	55	Yes No
2 Enter the exempt 3 Total ex line 17b 4 Did the 5 Enter the made personal transfer and the exempt of the exempt o	e amount directly expended be amount of the filing organization function activities empt function expenditures. A filing organization file Form 11 e names, addresses and empayments. For each organization received that were promaction committee (PAC). If addresses and extenditions received that were promaction committee (PAC). If addresses	Ation's funds contributed to o Add lines 1 and 2. Enter here 120-POL for this year? loyer identification number (E on listed, enter the amount pa notly and directly delivered to	ther organizations for and on Form 1120-PC (IN) of all section 527 p id from the filing organ a separate political or	section 527 DL, DOIITical organizations to whization's funds. Also enterganization, such as a sep	\$ Yes No hich the filing organization r the amount of political
political	(a) Name	(b) Address	(c) EIN	(d) Amount paid fror filing organization's funds. If none, enter -	contributions received and

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ,

Schedule C (Form 990 or 990-EZ) 2014

LHA 432041

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 THINK SMALL 41-1260581 Page 3

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

Fore	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
	e lobbying activity.	Yes	No	Amo	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?		marketing of the Co.		
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				n signin
C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?		-		
f			1		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h					
1	Other activities?				
ĵ	Total: Add lines 1c through 1i		A PART OF		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			***********	***************************************
b	If "Yes," enter the amount of any tax incurred under section 4912	# 1 (m) 1) d h			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	the many services	amental		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		1.51.1	2 10 1 10	the Albert
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or se	ction	
-	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	nacine march	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," O	R (b) Par	t III-A, fir	ie 3, is
1	Dues, assessments and similar amounts from members				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(t) tax was paid).	ical	normole English make up-		
a	Current year		2a		
b	Carryover from last year		2b		
C	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex		20 dia 2		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political	第三数 。		
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)	nacional estate	5		
Par	t IV Supplemental Information				
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou actions); and Part II-B, line 1. Also, complete this part for any additional information.	p list); Part	II-A, lines 1 a	and 2 (see	
_					
_					
		-			
				100 000	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.ics.gov/form990.

OMB No. 1546-0047 Open to Public Inspection

Employer identification number Name of the organization THINK SMALL 41-1260581

	organization answered "Yes" to Form 990, Part IV, line (6. (a) Donor advised funds	(b) Funds and other accounts
2	40m Village A May Octob	(a) Donor advised lunds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	ister at a training and the second of	V. 764.
5	Did the organization inform all donors and donor advisors in we are the organization's property, subject to the organization's expensive to the organization of the or	xclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad- for charitable purposes and not for the benefit of the donor or impermissible private benefit?	donor advisor, or for any other purpos	se conferring
Pa	rt II Conservation Easements. Complete if the orga	nization answered "Yes" to Form 990,	Part IV, line 7.
1 2	Purpose(s) of conservation easements held by the organization Preservation of land for public use (e.g., recreation or edi Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualifie	n (check all that apply). ucation) Preservation of a his Preservation of a ce	storically important land area artifled historic structure
	day of the tax year,		
			Held at the End of the Tax Yea
a	Total number of conservation easements		
b			
C	그 그림, 네티얼리아 지난 대통이라고 되는 경험 시간에는 그림을 시간에 나가 되었다면서 나를 받는데 그는 사람들이 그 나를 하는데 그를 다른다고 되었다.		
d	Number of conservation easements included in (c) acquired affiliated in the National Register		2° 142° 16.144
3	Number of conservation easements modified, transferred, release year ▶	ased, extinguished, or terminated by t	he organization during the tax
4	Number of states where property subject to conservation ease	ment is located >	
5	Does the organization have a written policy regarding the perio violations, and enforcement of the conservation easements it has been expected in the conservation easements.		
6	Staff and volunteer hours devoted to monitoring, inspecting, ar	nd enforcing conservation easements	during the year -
7	Amount of expenses incurred in monitoring, inspecting, and en	forcing conservation easements durin	ng the year ▶ \$
8	Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation include, if applicable, the text of the footnote to the organizatio conservation easements.	n easements in its revenue and expens	se statement, and balance sheet, and
Par	rt III Organizations Maintaining Collections of A Complete if the organization answered "Yes" to Form 99		Other Similar Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC historical treasures, or other similar assets held for public exhibit the text of the footnote to its financial statements that describe	ition, education, or research in furthe	
b	treasures, or other similar assets held for public exhibition, edurelating to these items:	cation, or research in furtherance of p	oublic service, provide the following amount
	(i) Revenue included in Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical treas the following amounts required to be reported under SFAS 116		sial gain, provide
a	Revenue included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

	edule D (Form 990) 2014 THINK S					41-12	26058	1 F	age 2
7	rt III Organizations Maintaining (
3	Using the organization's acquisition, access	lon, and other record	ds, check any of th	e following that are	a significa	nt use of Its	collection	on iter	กร
	(check all that apply):		7 ()						
8				change programs					
b			Other		_				_
C		D 3 - 11							
4	Provide a description of the organization's o						rt XIII.		
5	During the year, did the organization solicit of						-		-
16	to be sold to raise funds rather than to be m	aintained as part of	the organization's o	collection?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes		_ No
Pa	reported an amount on Form 990, Pa		ete if the organizati	on answered "Yes"	" to Form 9	90, Part IV,	line 9, or		
1a	Is the organization an agent, trustee, custod on Form 990, Part X?						Yes		□ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:	energen verter en tree		······································	20.77		7110
	Bardania Latarra				-		Amoun	ıt	
C	The second secon							_	_
d	CONTRACTOR OF THE CONTRACTOR O				1d			_	
e	TOTAL TOTAL TOTAL STATE	natamentan en an a		*****************	1e	_	_		
f	Ending balance Did the organization include an amount on F	000 D 4 V B					The co	-	Tra
					The second second		Yes	-	- No
Pa	If "Yes," explain the arrangement in Part XIII. rt V Endowment Funds. Complete i	Check here if the ex	xplanation has bee	n provided in Part	XIII		****************	-	4
ra	Lite V Endowment Funds. Complete								W. 174
do	Danisalan africas balance	(a) Current year	(b) Prior year	(c) Two years bac	k (a) Thre	e years back	(e) rou	ryears	back
1.0	Beginning of year balance							-	
b	The state of the s				-	-	-	_	
C	Net investment earnings, gains, and losses			-	_				-
d	Grants or scholarships			+	-		-		-
e									
	and programs						ļ		
f	Administrative expenses				-			_	
g	End of year balance			W. 11				-	_
2	Provide the estimated percentage of the curr		The state of the s	(a)) held as:					
a	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
C	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c should				JAN 199	V-03-04			
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held	and administered for	or the organ	nization	Ť	Un F	
	by:						1	Yes	No
	(i) unrelated organizations		*********	eri ele calendario de contrata da la decen	والمستحدد		3a(i)		
- 2	(ii) related organizations				*******		. 3a(ii)		-
Ь	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Schedule R?	ericija izvetenik se rendam.		بينيدوندسي	. 3b		
Do:	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm		wment funds.					_	_
Pal			H						
_	Complete if the organization answered				-		V 10 1 V 1		
	Description of property	(a) Cost or o basis (investo	nent) basis	(other)) Accumula depreciatio		(d) Bool		
1a	Land	45				100	20	5,0	00.
b	Buildings		2,70		,514,	990.	1,18	6,1	59.
c	Leasehold improvements			8,150.	5,6	528.			22.
d	Equipment		91	0,400.	833,8			6,5	
е	Other						- I		
	. Add lines 1a through 1e, (Column (d) must ed	nual Form 990 Part	Y column (B) line	100)		. •	1,47	0 2	06.

Part VIII Investments - Other Securities.		· · · · · · · · · · · · · · · · · · ·	41	-1200581 Page.
Complete if the organization answered "Yes" t	o Form 990 Part IV line	11h See Form 990	Part X line 12	
(a) Description of security or category (including name of security)	(b) Book value		valuation: Cost or end	l-of-year market value
(1) Financial derivatives			-	
(2) Closely-held equity interests				
(3) Other				
(A) WHITEBOX RELATIVE VALUE	***************************************			
(B) PARTNERS LP	334,391.	END-OF-	YEAR MARKET	VALUE
(C) WHITEBOX CREDIT PARTNERS				
(D) LP	297,030.	END-OF-	YEAR MARKET	VALUE
(E) WHITEBOX LONG SHORT				
(F) EQUITY FUND, LTD.	39,548.	END-OF-	YEAR MARKET	VALUE
(G)				3 1-11 113-11
(H)	CHO 000			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	670,969.			
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" t (a) Description of investment	(b) Book value		, Part X, line 13. valuation: Cost or end	Lofwear market value
	(b) Book value	(c) Method of	valuation, Cost of End	roryear marker value
(1)				
(2)	***************************************		***************************************	
(4)				
(5)				
(6)				
(7)				
(8)	CONTRACTOR OF THE PROPERTY OF			
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			and annu 192, Arri	s Asia da ang sarah sarah
Part IX Other Assets.				
Complete if the organization answered "Yes" t		11d. See Form 990,	, Part X, line 15.	
72.7	Description			(b) Book value
(1) SECURITY DEPOSITS	oma Nam			12,400
(2) CAPITALIZED DEVELOPMENT CO	DSTS, NET			1,081,407
(3)				
(4)				
(5)				O-MARCHER STATE OF THE STATE OF
(6)		***		
(7) (8)	•			
(9)			***************************************	• •
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)			1,093,807
Part X Other Liabilities.	/			
Complete if the organization answered "Yes" t	o Form 990, Part IV, line 1	11e or 11f. See For		
1. (a) Description of liability		(b) Book value		angella and and and a second and a second
(1) Federal income taxes				
(2)				
(3)				
(4)				the restriction on the content was their state of
(5)				
(6)				
(7)				
(8)				
(9)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

EXAMINATION BY ANY TAXING JURISDICTION. FEDERAL AND STATE TAX AUTHORITIES

432054 10-01-14

SCHEDULE (Form 990)

Department of the Treasury Infernal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

2014
2014
Copen to Public Inspection

Information about Schedule I (Form 990) and its instructions is at www is gov/form990.

	ILL						Employer identification number 41-1260581	umber 581
Part I. General Information on Grants and Assistance	and Assistance							
	to substantiate ti istance?	he amount of the grants	s or assistance, the	grantees' eligibilit	ty for the grants or as	ssistance, and the selec	ction X Yes	No.
	ocedures for mor	itoring the use of grant	tiunds in the United	5 States.				
Fart II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be dublicated if additional space is needed.	Soloto Part II ca	nizations and Domesti n be duplicated if addit	ic Governments. C	omplete if the org	anization answered	Yes" to Form 990, Par	t IV, line 21, for any	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	4
3 R'S BARLY CHILDHOOD LEARNING CENTER - 4900 85TH AVE N - BROOKLYN PARK, MN 55443	37-1580191	S/A	19,575,	.0.	0, N/A	N/A	EARLY LEARNING SUPPORT	RT
ALL WE CAN BE 1418 DODDRIDGE AVE CLOQUET, MN 55720	41-1000979	501(0)(3)	30,480.	0.	K/N.0	N/A	EARLY LEARNING SUPPORT	R
AMAZING BEGINNINGS 3239 70TH ST INVER GROVE HEIGHTS, MN 55076	45-1352541	N/A	18,684.	0.	м/а	N/a.	EARLY LEARNING SUPPORT	RT
AMHERST H WILDER FOUNDATION CPS BILLING, 451 LEXINGTON PKWY N ST PAUL, MN 55104	41-0693889	501(C)(3)	249,505.	D.	N/A	N/A	EARLY LEARNING SUPPORT	RT
AWAB A ADEM 6720 DUCK LAKE RD EDEN PRAIRIE, MN 55346		M/8	11,222.	o	0.N/A.	N/A	BARLY LEARNING SUPPORT	E
ANGELA KAPP DBA ARONA CHILD DEVELOPMENT, 1475 ST PAUL, MN 55108	45-5496096 N/A	к/а	5,449.	. O	0.N/a	N/A	PARLY LEARNING SUPPORT	E+ pr
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	and government or	organizations listed in the	ne line 1 table		***************************************		\[\]	75.
-	s, see the Instruc	ations for Form 990.					Schedule I (Form 990) (2014)	(2014)

H	1
-	1
MA	į
U	i
¥	1
F	1
F	1

Schedule 1 (Form 990) THINK SMALL	LL				7.97		41-1260581 Page 1
Part'il Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (Form 990), Part II)	Assistance to Go	vernments and Organ	nizations in the Ur	ited States (Sche	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANOKA CO COMM ACTION PROGRAM HEAD START, 1201 89TH AVE NE, #345 BLAINE, MN 55434	41-6048575	501(C)(3)	301,737.	0.	N/A	N/A	EARLY LEARNING SUPPORT
ARROWHEAD ECONOMIC OPPORTUNITY AGENCY, INC - 702 3RD AVE S - VIRGINIA, MN 55792	41-6052144	501(0)(3)	92,499.	0	N/A	N/A	BARLY LEARNING SUPPORT
AUDREY NEAL 1038 BLAIR AVE ST PAUL, MN 55104	20-4214685	M/A	7,217.	0	. N/A	N/A	EARLY LEARNING SUPPORT
BABY'S SPACE: A PLACE TO GROW 2438 18TH AVE S MPLS, MN 55404	20-2402788	N/A	56,663.	,0	N/A	N/A	EARLY LEARNING SUPPORT
BAHILA Y BARRE 1029 HAZELWOOD ST ST PAUL, MN 55106		N/A	12,344.	0	N/A	W/A	EARLY LEARNING SUPPORT
BARNUM LITTLE B'S CHILDCARE CENTER 3690 CO RD 140 BARNUM, MN 55707	26-0640565	N/A	28,520.	0	N/A	N/A	BARLY LEARNING SUPPORT
BARNUM PUBLIC SCHOOLS 3675 COUNTY RD 140 BARNUM, MN 55707	41-6000448	M/A	13,885.	0	0.N/A	N/A	EARLY LEARNING SUPPORT
BETHEL UNIVERSITY 376 WESTERN AVE ST PAUL, MN 55103	41-0708577	501(C)(3)	88,521.	6	6.N/A	N/A	EARLY LEARNING SUPPORT
BLOOM BARLY LEARNING 17805 COUNTY RD 6 PLYMOUTH, MN 55447	41-1939043	501(C)(3)	12,729.	. 0	0,N/A	N/A	EARLY LEARNING SUPPORT
							oscillania al la asolos

-	1
α)
15)
C	3
U	5
C	Į
-	4
1	
-	4
V	ľ

Fart II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Hasisiance to c	overnments and Orga	INIZATIONS IN The U	nited States (Sche	dule I (rorm 990), P	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOIS FORTE RESERVATION TRIBABL COUNCIL - 5344 LAKESHORE DR - NETT LAKE, MN 55772	41-0954784	K/A	34,500.	2.0	e/x	K/N	BARLY LEARNING SUPPORT
BRIGHT WATER MONTESSORI SCHOOL 5140 FREMONT AVE N MINNEAPOLIS, MN 55430	20-0365261	501(0)(3)	43,796.	E/N.0	£//	N/a	EARLY LEARNING SUPPORT
BROOKLYN CENTER COMMUNITY EDUCATION - ATTN: FFN SCHOOL READINESS PROJECT-ECFE, 6500 HUMBOLDT AVE N - BROOKLYN CENTER,	41-6009038	¥/N	112,691,	o o	N/3.	K/A	EARLY LEARNING SUPPORT
BUILDING BLOCK CHILD CARE INC 3405 ANNAPOLIS LN N, #100 PLYMOUTH, NN 55447	41-0971379	N/A	373,558.	0.N/A	/3	N/A.	BARLY LEARNING SUPPORT
BUSY BEES CHILD CARE CENTER INC 3300 CENTURY AVE WHITE BEAR LAKE, MN 55110	41-1340329	N/a	19,445.	0,N/A	4/8	N/A	EARLY LEARNING SUPPORT
CATHOLIC CHARITIES OF THE ARCHDIOCESE OF ST PAUL AND MINNEAP - 1200 2ND AVE S - MINNEAPOLIS, MM 55403	41-1302487	501(C)(3)	240,145,	. 6	N/A.	N/A	BARLY LEARNING SUPPORT
CEDAR RIVERSIDE COMMUNITY SCHOOL 1610 S 6TH ST MINNEAPOLIS, MN 55454	41-1748473	501(C)(3)	79,575.	, o	N/A	N/A	BARLY LEARNING SUPPORT
CENTRAL LUTHERAN SCHOOL 775 N LEXINGTON PKWY ST PAUL, MN 55104	41-6008777	501(C)(3)	20,439,	0,	м/я	N/A.	EARLY LEARNING SUPPORT
CENTRO TYRONE GUZMAN 1915 CHICAGO AVE S ATMINISTRATE AM ERAAA	0.00	VE).VO).W3	9 P	67.24	5	1	

SMALL	
THINK	
1 990)	

Schedule I (Form 990) THINK SMALL	LL		1	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			41-1260581 Page 1
(a) Name and address of conganization or government or government (b) EIN (c) IRC section organization or government (b) EIN (c) IRC section (d) Amount of valuation (b) Method of valuation (b) EIN (f) Method of valuation (b) EIN (f) Method of valuation (b) EIN (f) Method of valuation (f) Metho	(b) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABAD ACADEMY INC 1758 FORD PKWY ST PAUL, MN 55116	41-1763738	501(C)(3)	12,634.	0	W/A	N/A	BARLY LEARNING SUPPORT
CHILDREN'S COUNTRY DAY SCHOOL INC 1588 S VICTORIA RD MENDOTA HEIGHTS, MN 55118	41-1442559	N/A	39,296.	0	.N/A	N/A	BARLY LEARNING SUPPORT
CHILDREN'S DISCOVERY CHILD CARE AND LEARNING INC - 3665 TALMAGE CIR - VADNAIS HEIGHTS, MN 55110	41-1391058	N/A	31,922.	0, W.A	//a	N/A	EARLY LEARNING SUPPORT
CHOO CHOO MONTESSORI LLC 2617 DULUTH STREET MAPLEWOOD, MN 55109	27-2894890	N/A	7,698.	0	N/a	M/A	EARLY LEARNING SUPPORT
CHRISTA E MOSTOLLER 523 NE 8TH AVE GRAND RAPIDS, MN 55744	38-3733178	N/A	8,528.	0.0/.	1/3	M/A	EARLY LEARNING SUPPORT
CLOSE TO MY HEART 1740 VAN DYKE ST MAPLEWOOD, MN 55109	41-1847732	501(c)(3)	36,706.	0	0.N/A	N/A	EARLY DEARNING SUPPORT
COMFORT DAYCARE 310 E 38TH ST, STE LL35 MINNEAPOLIS, MN 55409	27-1285294	8/A	23,305.	0	N/A	N/A	EARLY LEARNING SUPPORT
COMMUNITY ACTION PARTNERSHIPS RAMSEY & WASHINGTON COUNTIES - ATTN: RICH BOYCE, 450 SYNDICATE ST - ST PAUL, MN 55104	41-0883443	501(0)(3)	1,007,554.	0	N/a	N/A	EARLY LEARNING SUPPORT
COMMUNITY CHILD CARE CTR ST PAUL 1250 FIFIELD AVE ST PAUL, MN 55108	23-7392142	501(C)(3)	9,314,	0.0	. W.A	N/A	EARLY LEARNING SUPPORT
77000			8				Schedule I (Form 990)

1		4
(×	3
1	s	١
¢	2	5
A	٤	5
(۹
¥		1

		Overments and Olga	ווילמחסווס ווו חוב סו	וויבת סומובא (סרוום	וא פוות סופטווילפתסוום ווו מוב סווונכת סופוכם (סרוובתחוב ו (בחווו פפח), בפנדון	arr III.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORNERSTONS MONTESSORI SCHOOL 1611 AMES AVE ST PAUL, MN 55106	41-1361913	501(C)(3)	91,619.	o.N/A	/A	N/A	BARLY LEARNING SUPPORT
CREATIVE KIDS ACADEMY ATTN: BRANDY SROGA-COONS, 855 VILLAGE CENTER DR, \$382 - ST PAUL, MN 55127	26-4136621	N/8	33,352.	. o	N/A	M/A	BARLY LEARNING SUPPORT
DODGE NATURE PRESCHOOL & THOMAS IRVINE NATURE CENTER - 1715 CHARLTON ST - WEST ST PAUL, MN 55118	41-6081794	501(0)(3)	64,425.	0.8/8	/A	N/A	BARLY LEARNING SUPPORT
DULUTH AREA FAMILY YMCA 301 WEST 1ST ST DULUTH, MN 55802	41-0693931	501(0)(3)	10,735.	0.8/A	4/	N/3-	MARLY LEARNING SUPPORT
EAST SIDE NEIGHBORHOOD SERVICES NORTHEAST CHILD DEVELOPMENT CENTER, 1700 2ND ST NE - MINNEAPOLIS, MN 55413	41-0873798	501(C)(3)	10,121.	0.478.0	æ	4/8	MARLY LEARNING SUPPORT
ECFE - OSSEO AREA SCHOOLS ATTN: SALLY NAULT-MAURER, 9401 FERNEROCK IN N - MAPLE GROVE, MN 55369	41-5001421	N/A	139,244.	0.0	N/8	N/A	BARLY LEARNING SUPPORT
EDINA MORNINGSIDE NURSERY 4201 MORNINGSIDE RD EDINA, MN 55416	41-0832616	501(C)(3)	14,564.	и. о	м/в	8/A.	SARLY LEARNING SUPPORT
ELIM PRESCHOOL 685 13TH AVE NE MINNEAPOLIS, MN 55413	26-3996303	501(0)(3)	23,225.	6/N.0	(A	N/A	BARLY LEARNING SUPPORT
ERIN LUNDE 2240 KELLY AVE CYGOHER NN 55720		22	ă	0 81/2		e 2	mandam Switzaka i Viasa

	O Lottell out an one of or in one of a comment
THINK SMALL	source of activity and the source of a source of
SOO THILL	20 chrone
I (Form	Continuo C

Schedule I (Form 990) THINK SMALL Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	LL Assistance to Go	vernments and Organ	izations in the Ur	ited States (Sche	edule I (Form 990), Pa		41-1260581 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ESPECIALLY FOR CHILDREN INC 5223 W 73RD ST EDINA, MN 55439	41-1318998	N/A	35,633.	• 0	N/A	N/A	BARLY LEARNING SUPPORT
EXCELL ACADEMY FOR HIGHER LEARNING CHARTER SCHOOL - 6510 ZANE AVENUE N - BROOKLYN PARK, MN 55429	41-1968867	501(C)(3)	61,255.	Ô	N/A	N/A	BARLY LEARNING SUPPORT
FAMILYWISE SERVICES 3036 UNIVERSITY AVE SE MINNEAPOLIS, MN 55414	41-1343909	501(C)(3)	14,414.	Ö	N/A	N/A	BARLY LEARNING SUPPORT
HALLIE Q. BROWN COMMUNITY CTR 270 N KENT ST ST. PAUL, MN 55102	41-0693846	501(C)(3)	85,784.	.0	N/A	N/A	BARLY LEARNING SUPPORT
HAND IN HAND CHILD CARE CENTER 1250 CONCORDIA AVE ST PAUL, MN 55104	41-0696906	501(C)(3)	15,744.	0	A/A	·	EARLY LEARNING SUPPORT
HAPPY TIME DAY CARE CENTER 203 N 25TH AVE W DULUTH, MN 55806	41-0956465	N/A	34,245.	.0	N/A	N/A	BARLY LEARNING SUPPORT
HASTINGS CHILD DEVELOPMENT CENTER 210 17TH ST W HASTINGS, NN 55033	26-4128190	4/n	30,281.	Ö	W/A	M/A	BARLY LEARNING SUPPORT
HEATHER SCHMITZ 102 PARKWOOD DR WRENSHALL, MN 55797		N/A	6,325.	.0	N/A	N/A	BARLY LEARNING SUPPORT
HERMANTOWN COMMUNITY CHURCH 4880 MAPLE GROVE RD HERMANTOWN, MN 55811	41-1741384	501(0)(3)	51,707.	.0	0.N/A	N/A	EARLY LEARNING SUPPORT Schedule I (Form 990)

5	-	
0	X	
L	0	
C		
4	0	
0	V	
	Н	
	1	
	H	
*	4	

Tate: Commission of dails and Other Assistance to dovernments and organizations in the Office States (Schedule (FOITH 590), Faith,	- Announced	DR to be to		inal anna anna	· Kana · · · · · · · · · · · · ·	Part III	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HMONG AMERICAN PARTNERSHIP 1075 ARCADE ST ST PAUL, MN 55106	41-1667580	501(C)(3)	8,704.	0	0.N/A	N/A	BARLY LEARNING SUPPORT
HOPKINS BARLY LBARNING CENTER ATTN: JULIA WINKELMAN, 125 MONROE A HOPKINS, MN 55343	41-1408605	501(C)(3)	14,553.	0.	0.N/A	N/A	BARLY LEARNING SUPPORT
INSTEP JABBOK FAMILY SERVICES, 2608 BLAISDELL AVE S - MINNEAPOLIS, MN 55408	41-1869548	\$01(C)(3)	11,657.	0.	e/N	N/A.	EARLY LEARNING SUPPORT
ISD 0001 - AITKIN 225 2ND AVE SW AITKIN, MN 56431	41-6000001	SCHOOL DISTRICT	24,526.	ō.	0.N/A	N/A	EARLY LEARNING SUPPORT
ISD 02 - HILL CITY 500 IONE AVE HILL CITY, MN 55748	41-6000027	SCHOOL DISTRICT	27,867,	0.	0, N/A	N/A	EARLY LEARNING SUPPORT
ISD 04 - MCGREGOR 148 S 2ND ST MCGREGOR, MN 55760	41-6007875	SCHOOL DISTRICT	25,000,	ò	0.11/2	X/A	EARLY LEARNING SUPPORT
ISD 100 - WRENSHALL 207 PIONEER DR WRENSHALL, MN 55797	41-6000454	SCHOOL DISTRICT	24,996,	6	8/8	N/A	BARLY LEARNING SUPPORT
ISD 108 - CENTRAL KURIOUS KIDS, 531 MONROE ST NORWOOD YOUNG AMERICA, MN 55368	41-6000487	SCHOOL DISTRICT	22,090.	9.	0.N/A	N/A	EARLY LEARNING SUPPORT
ISD 11 - ANOKA-HENNEPIN MARILEE CHRISTENSEN-ADAMS, 2727 N 3	41-6008267	SCHOOL DISTRICT	152,740,	0	0.878	8/8	BARLY LEARNING SUPPORT

	-	ł
i	X	
	5	
	Š	
	i	
	5	
		7
,	-	
	. 1	1
3	Ċ	

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Other Assistance to G	overnments and Organ	izations in the Un	ited States (Sch	edule I (Form 990), P	art II.)	
(a) Name and address of organization or government	NE (a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISD 111 - MATERTOWN-KAYER 1011 HIGHWAY 25 NW WATERTOWN, MN 55388	41-6000473	SCHOOL DISTRICT	25,020.	ò	0.N/A	N/A	EARLY LEARNING SUPPORT
ISD 112 - EASTERN CARVER COUNTY 11 PEAVEY RD CHASEA, MN 55318	41-6000464	SCHOOL DISTRICT	34,760.	ò	0, N/A	N/A	BARLY LEARNING SUPPORT
ISD 13 - COLUMBIA HRIGHTS 1440 49TH AVE NE COLUMBIA HEIGHTS, MN 55421	41-6000080	SCHOOL DISTRICT	111,623.	á	N/3	k/k	EARLY LEARNING SUPPORT
ISD 14 - FRIDLEY 6000 W MOORE LAKE DR FRIDLEY, MN 55432	41-6000056	SCHOOL DISTRICT	87,945.	0,	F/N	N/A	RARLY LEARNING SUPPORT
ISD 15 - ST FRANCIS 4115 AMBASSADOR BLVD ST FRANCIS, MN 55070	41-6008370	SCHOOL DISTRICT	18,093,	ó	N/A	N/A	BARLY LEARNING SUPPORT
ISD 16 - SPRING LAKE PARK COMMUNITY BD, 1415 81ST AVE NE SPRING LAKE PARK, MN 55432	41-6008529	SCHOOL DISTRICT	45,610.	6	N/A	N/A	EARLY LEARNING SUPPORT
ISD 191 - BURNSVILLE ATTN: CINDY CHECK, 200 W BURNSVILLE PKWY, \$100 - BURNSVILLE, MN 55337	41-6000802	SCHOOL DISTRICT	211,750.	o.	4/N	N/8.	EARLY LEARNING SUPPORT
ISD 192 - FARMINGTON 20655 FLAGSTARE AVE FARMINGTON, MN 55024	41-6007663	SCHOOL DISTRICT	24,286.	°°	K/A	N/2	BARLY LEARNING SUPPORT
ISD 194 - LAKEVILLE 8670 210 ST W	6			k	Š		

14.7	
1	ı
00	
10	
0	
6	
3	
-	۱
- 1	
4	
-	

illian (Control)		מונים מונים מונים מונים	HEADON IN MIC CO.	ווונבת סומובט וסרו וב	dule i (i oiiii seo), r	di II.)	
(a) Name and address of organization or government.	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISD 196 - ROSEMOUNT 3455 153RD ST W ROSEMOUNT, MN 55068	41-5007792	SCHOOL DISTRICT	72,965.	0	0, N/A	N/A	EARLY LEARNING SUPPORT
ISD 197 - WEST ST PAUL-MENDOTA HBIGHTS - FINANCE DEPARTMENT, 1897 DELAWARE AVE - MENDOTA HEIGHTS, MN 55118-4338	41-6007628	SCHOOL DISTRICT	15,073.	0.8	N/A	N/A	BARLY LEARNING SUPPORT
ISD 199 - INVER GROVE HEIGHTS 2990 E 80TH ST INVER GROVE HEIGHTS, MN 55076	41-6008805	SCHOOL DISTRICT	74,451.	8,	N/A	N/A	EARLY LEARNING SUPPORT
ISD 200 - HASTINGS 310 RIVER ST HASTINGS, MN 55033	41-6000810	SCHOOL DISTRICT	.15,557.	0,N/A	3/A	8/8	BARLY LEARNING SUPPORT
ISD 2154 - EVELETH-GILBERT 801 JONES ST EVELETH, MN 55734	41-1744324	SCHOOL DISTRICT	12,494.	0.0	N/A	N/A	EARLY LEARNING SUPPORT
ISD 270 - HOPKINS ATTN: ACCTS REC, 1001 HIGHWAY 7 HOPKINS, MN 55305	41-5008248	SCHOOL DISTRICT	35,705.	8	N/B	8/8	BARLY LEARNING SUPPORT
ISD 271 - BLOCMINGFON ATTN: CAROL HUTTNER, 2575 W 88TH ST BLOCMINGFON, NN 55431	41-6001463	SCHOOL DISTRICT	207,485.	0	N/A	K/A	SARLY LEARNING SUPPORT
ISD 272 - EDEN PRAIRIE PRE-KINDERGARTEN PROGRAMS, 8100 SCH EDEN PRAIRIE, MN 55344	41-6001462	SCHOOL DISTRICT	26,750.	0.0	N/A	N/A	BARLY LEARNING SUPPORT
ISD 273 - EDINA EDINA FAMILY CENTER, 5701 NORMANDAL	11	EC THEORY	S			Ç,	

				١
0	۲			١
ð	¢	þ	¢	
2	L	4	ŕ	١
9	¢	Ì		
Ì	١	d	Ċ	
ì	C	?	١	į
h	,			1
			ı	
		1		

ratin Commusion of Grants and Other Assistance to dovernments and organizations in the United States (Schiedule (FOITH 590), Faith).	Assistance to G	overnments and Organ	IZATIONS IN THE UI	lited States (Sch	edule (Form 950), P	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISD 276 - MINNETONKA 5621 COUNTY ROAD 101 MINNETONKA, MN 55345	41-6001402	SCHOOL DISTRICT	10,237.	o	N/A	N/A	BARLY LEARNING SUPPORT
ISD 278 - ORONO 5050 INDEPENDENCE ST MAPLE PLAIN, MN 55359	41-6001403	SCHOOL DISTRICT	19,164.	0	N/A	N/A	EARLY LEARNING SUPPORT
ISD 282 - ST ANTHONY-NEW BRIGHTON 3301 SILVER LAKE RD ST ANTHONY, MN 55418	41-5001400	SCHOOL DISTRICT	14,012.	Ġ.	0.N/A	N/A	BARLY LEARNING SUPPORT
ISD 283 - ST LOUIS PARK ALTN: CYNTHIA PETERSON, 6425 W 33RD ST LOUIS PARK, MN 55426	41-6001466	SCHOOL DISTRICT	52,155.	ó	0,8/2	N/3	EARLY LEARNING SUPPORT
ISD 361 - INTERNATIONAL FALLS 1515 11TH ST INTERNATIONAL FALLS, MN 56649	41-5001826	SCHOOL DISTRICT	25,000.	0	0.N/A	N/A	BARLY LEARNING SUPPORT
ISD 521 - MOUNDS VLEW 2101 14TH ST NW NEW BRIGHTON, MN 55112	41-5008084	SCHOOL DISTRICT	61,285.	o	0.N/A	N/A	BARLY LEARNING SUPPORT
ISD 622 - N ST PAUL, MAPLEWOOD, OAXDALE - 2520 E 12TH AVE - NORTH ST PAUL, MN 55109	41-6008435	SCHOOL DISTRICT	106,855.	0	0.N/A	N/A	BARLY LEARNING SUPPORT
ISD 623 - ROSEVILLE ATTN: BARLY CHILDHOOD, 701 COUNTY R ROSEVILLE, MN 55113	R. 41-6003439	SCHOOL DISTRICT	80,529.	0	0.N/A	N/A	EARLY LEARNING SUPPORT
ISD 624 - WHITE BEAR LAKE 4855 BLOOM AVE	1. C.	POTENTY TO TOTAL	088 87	· ·	e/N	4/ <i>N</i>	BARLY LEARNING SUPPORT

	-	4
	X	
	8	
	Ξ	
١	1)
	1	q
•	-	4
	1	
*		4
	7	

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (Form 990), Part III)	Assistance to G	overnments and Organ	izations in the Ur	inted States (Sch	edule I (Form 990), P	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISD 625 - ST PAUL ATTN: BUSINESS OFFICE, 360 COLBORNS ST PAUL, MN 55102	41-0901311	SCHOOL DISTRICT	1,594,331,	0	0.N/A	N/A	EARLY LEARNING SUPPORT
ISD 695 - CHISHOLM 1000 NE 1ST AVE CHISHOLM, MN 55719	41-6003769	SCHOOL DISTRICT	25,050.	· o	0,N/A	8/2	EARLY LEARNING SUPPORT
ISD 598 - FLOODWOOD 115 W 4TH AVE FLOODWOOD, MN 55736	41-6003757	SCHOOL DISTRICT	23,732.	ò	0.N/A	N/A	SARLY LEARNING SUPPORT
ISD 700 - HERMANTOWN 5028 MILLER TRUNK HWY HERMANTOWN, MW 55811.	41-6003749	SCHOOL DISTRICT	11,688.	0	6.N/A	k/a	EARLY LEARNING SUPPORT
ISD 704 - PROCTOR 131 9TH AVE PROCTOR, MN 55810	41-6003748	SCHOOL DISTRICT	25,000,	.0	0.N/A	N/A	HARLY LEARNING SUPPORT
ISD 706 - VIRGINIA 411 S 5TH AVE VIRGINIA, MN 55792	41-6003760	SCHOOL DISTRICT	36,222,	ò	N/3.	8/8	EARLY LEARNING SUPPORT
ISD 709 - DULUTH 215 N 1ST AVE B DULUTH, NN 55802-2058	41-6003776	SCHOOL DISTRICT	338,793.	Ď.	0.N/A.	N/A	EARLY LEARNING SUPPORT
ISD 712 - MOUNTAIN IRON-BUFL FO BOX 537 MOUNTAIN IRON, MN 55768	41-1521544	SCHOOL DISTRICT	25,970,	0.	0.N/A	N/A	EARLY LEARNING SUPPORT
ISD 717 - JORDAN 500 SUNSET DR	41-6003-75	mortamort Tocare	9 15 15	G	, , , , , , , , , , , , , , , , , , ,	6 2	nandaro avervaca i viaca

4	d
O	Q
14	٦
C	Þ
U	o
C	Q
-	4
.2)	١
5	4
5	31

Tairii Commidanon of Chans and Cours Assistance to Governments and Organizations in the United States (Schedule FORTH), Farth,	Assistance to G	overnments and organ	IlZarions in tile or	lited states (SCI	edule I (rorm sau), r	art III.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of hon-cash assistance	(h) Purpose of grant or assistance
ISD 719 - PRIOR LAKE-SAVAGE 5304 WEST WOOD DR SE PRIOR LAKE, MN 55372	41-5007904	SCHOOL DISTRICT	12,428.	6	0.N/A	K/A	EARLY LEARNING SUPPORT
ISD 720 - SHAKOPEE 505 HOLMES ST S SHAKOPEE, MN 55379	41-6003781	SCHOOL DISTRICT	47,565,	0.0	A/N.0	N/A	BARIY LEARNING SUPPORT
ISD 831 - FOREST LAKE 200 SW 4TH ST POREST LAKE, MN 55025	41-6008218	SCHOOL DISTRICT	30,368.	0.	0.N/A	N/A	BARLY DEARNING SUPPORT
ISD 832 - MAHTOMEDI 1520 MAHTOMEDI AVE MAHTOMEDI, MN 55115	41-6007883	SCHOOL DISTRICT	.28,696.	0	A/N.0	N/A	BARLY LEARNING SUPPORT
ISD 833 - S WASHINGTON COUNTY 8400 EAST POINT DOUGLAS RD S COTTAGE GROVE, MN 55016	41-6007788	SCHOOL DISTRICT	32,775.	.0.	0. N/A	N/A	EARLY LEARNING SUPPORT
ISD 834 - STILLWATER 1875 S GREELRY ST STILLWATER, MN 55082	41-6008519	SCHOOL DISTRICT	8,284.	.0	N/A	N/A	ZARLY LEARNING SUPPORT
ISD 94 - CLOQUET 1000 18TH ST CLOQUET, MN 55720	41-6000450	SCHOOL DISTRICT	7,980.	0.	N/A	N/A	EARLY LEARNING SUPPORT
ISD 97 - MOOSE LAKE 413 BIRCH AVE MOOSE LAKE, MN 55767	41-5000445	SCHOOL DISTRICT	18,483.	o	0.N/A	N/A	BARLY LEARNING SUPPORT
ITASCA AREA SCHOOLS COLLABORATIVE ATTM: BUSINESS OFFICE, PO BOX 307, 101 IST ST NE - DEER RIVER, MN	0001	5	и е и	c	4.5	ñ ۲۷	metality Christian

20	١
4	
a	3
14	٦
C	2
U	9
5	q
-	d
5	1
-	н

	Assistance to de	Wellinellis and Olga	The same of the sa	Ilica orates (onli	addict (Collicator)	air iii)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JANET LECLAIR 115 SE 11TH ST GRAND RAPIDS, MN 55744	26-0524324	N/A	8,348.	0	0.N/A	A/N	BARLY LEARNING SUPPORT
JEANETTE THAO 731 MAGNOLIA AVE E ST PAUL, MN 55106	30-0498558	8/2	19,811.	0.	0.N/A	N/A.	EARLY LEARNING SUPPORT
JEREKIAH PROGRAK 1510 LAUREL AVE S. #100 MINNEAPOLIS, MN 55403	41-1801834	501(G)(3)	83,323.	0.	N/B	N/A	EARLY LEARNING SUPPORT
JOYCE PRESCHOOL 3400 PARK AVE S MINNEAPOLIS, MN 55407	81-0594016	501(C)(3)	76,203.	0.	N/A	N/A	EARLY LEARNING SUPPORT
JULIE SMITH 2883 CENTER RD SW PRIOR LAKE, MN 55372	86-1087466	N/A	17,064.	0.	0,N/A	N/A	EARLY LEARNING SUPPORT
KELSEY MARIE WILKENS 29606 CHEROKEE RD BOVEY, MN 55709		N/A	6,478,	0	0.N/A	N/A	BARLY LEARNING SUPPORT
KHCD II INC ATTN: KINDRA LEWIS, 3405 ANNAPOLIS PLYMOUTH, NN 55447	41-1665459	M/A	35,929.	0.	м/а	N/A	BARLY LEARNING SUPPORT
KHCH I INC ATTN: KINDRA LEWIS, 3405 ANNAPOLIS PLYMOUTH, NN 55447	41-1665458	N/A	9,032,	0.	0.N/A.	s/a	BARLY LEARNING SUPPORT
KIDDY KAROUSEL 3920 13TH AVE B HIBBING, AN 55746	41-1236276	501(0)(3)	18,461.	o	A/N.0	N/A	RARLY LEARNING SUPPORT

Factil Continuation of draits and other Assistance to dovernments and Organizations in the Office Sales (Soft Fourity), Factility	Assistance to G	overnments and Orga	in am ill silonezili	lited States (Sche	due l (roll) sant	art III.)	
(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIDS COME 1ST CORPORATION 1818 GREENVIEW PL SW ROCHESTER, MN 55902	41-1638119	N/A	11,975.	0	8/A	N/A	EARLY LEARNING SUPPORT
KIDS COUNTRY CHILD CARE CENTER INC 23256 ST PRANCIS BLVD NW ST FRANCIS, MN 55070	41-2016677	N/A	5,300.	0	0.N/A	N/A	RARLY LEARNING SUPPORT
KINDERCARE LEARNING CENTERS LLC 650 NE HOLLADAY ST, #1400 PORTLAND, OR 97232	63-0941966	8/2	638,892.	0	N/A	K/A	BARLY LEARNING SUPPORT
KINDERPLATZ INC 5600 AMERICAN BLVD W, #180 BLOOMINGTON, WN 55437	41-1561825	N/A	5,000.	0	N/A	N/2	EARLY LEARNING SUPPORT
KNOWLEDGE UNIVERSE EDUCATION LLC 650 NE HOLLADAY ST, #1400 PORTLAND, OR 97232	06-1097006	M/A	451,206.	0	0.N/A	8/8	BARLY LEARNING SUPPORT
KOOTASCA COMMUNITY ACTION INC 201 NW 4TH ST, #130 GRAND RAPIDS, MN 55744	41-0904805	501(C)(3)	124,855.	0	0.N/A	N/A	RARLY LEARNING SUPPORT
LA CRECHE BARLY CHILDHOOD CENTERS 1800 OLSON MEMORIAL HWY MINNEAPOLIS, MN 55411	41-0958652	501(0)(3)	338,044.	0.	N/8	8/8	BARLY LEARNING SUPPORT
LAKE AREA DISCOVERY CENTER 3770 BELLAIRE AVE WHITE BEAR LAKE, MN 55110	41-1937239	501(C)(3)	15,736.	0.	N/A	E/8	EARLY LEARNING SUPPORT
LAUGH AND LEARN 1506 WASHINGTON AVE CLOOUST NN 55720	45-5512396	4/20	11, 156,	o	, k	N/A	EARLY LEARNING SUPPORT

V	1
α)
u	1
C)
V	٥
0	1
1	ł
-	1
Z	1

y at all 11 Continuation of creates and outer Assistance to Overnments and organizations in the Office Octavial SOUP (1911)	Assistance to de	overnments and orga	nizauons in the o	mired States (SCI	equie (Form 990), P	ar II.)	
(a) Name and address of organization or government.	(e) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEARN & GROW CHILD CARE CENTER INC 13142 CENTRAL AVE NE BLAINE, MN 55434	41-1560873	501(0)(3)	14,750.	0.	N/A.	N/A	EARLY LEARNING SUPPORT
LEXINGTON KIDS CHRISTIAN CHILDCARB 701 LEXINGTON PKWY N ST PAUL, MN 55104	71-0884621	N/A	88,900.	0	0.N/A	8/8	BARLY LEARNING SUPPORT
LIFETRACK RESOURCES 709 UNIVERSITY AVE W ST PAUL, MN 55104	41-0874507	501(C)(3)	17, 203.	.0	N/A.	N/A	EARLY LEARNING SUPPORT
LIGHTHOUSE EXPLORERS CHRISTIAN CHILD CENTER - 3285 144TH ST W - ROSEMOUNT, MN 55068	45-4789279	501(0)(3)	12,335.	O.	0.N/A	N/B	EARLY LEARNING SUPPORT
LITTLE EXPLORERS DISCOVERY CENTER LLC - PO BOX 317 - BIGFORK, MN 56628	45-4536250	8/8	5,780.	0	K/A	M/A	BARLY LEARNING SUPPORT
LITTLE VOYAGEURS' MONTESSORI. SCHOOL INC - 825 51ST AVE NE - COLUMBIA HEIGHTS, MN 55421	41-1327355	501(0)(3)	30,583.	0	N/A	K/N	EARLY LEARNING SUPPORT
LUBAVITCH BARLY CHILDHOOD CENTER 1758 FORD FKWY ST PAUD, NN 55116	41-1763768	501(c)(3)	12,134,	0	0.N/A	K/A	EARLY LEARNING SUPPORT
LUCKY CHILD CARE CENTER 525 LOWRY AVE N. MINNEAPOLIS, MN 55418	46-1224233	N/a	6,724.	ď	0.N/A	8/8	EARLY LEARNING SUPPORT
MAO THAO 5100 PAUL DR		6/20	39 732	o	4/2	n k	PROBLY INTERNALLY CHARACT

-	-
C	ø
L	n
C	0
1	0
0	V
τ	4
	١
t	4
	4

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (Form 990), Part II.)	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sche	dule I (Form 990), P	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant.	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAUREEN MARGARET SCHARFFEILLIG 6962 40TH ST N OAKDALE, MN 55128		N/A	9,082.	o.	0.M/A	8/8	BARLY LEARNING SUPPORT
MAY L YANG 18089 EMERY AVE HASTINGS, NN 55033	46-4679038	K/A	16,638,	0,	N/A	N/2	EARLY LEARNING SUPPORT
MAYFLOWER EARLY CHILDHOOD CENTER 105 EAST DIAMOND LAKE RD MINNEAPOLIS, MN 55419	27-1543720	501(C)(3)	17,840.		0.N/A	N/A	EARLY LEARNING SUPPORT
MEB LOR 279 BINA ST ST PAUL, MN 55106		w/a	21,167.	Ö	6.N/A	N/A	SARLY LEARNING SUPPORT
MI FAMILIA CHILD CARE CENTER. 1855 47TH ST E INVER GROVE HEIGHTS, MN 55076	45-5587465	w/a	20,124,	ò	w/a	8/8	BARLY LEARNING SUPPORT
MINIAPPLE INTERNATIONAL MONTESSORI SCHOOL INC - 75 APPLE ORCHARD RD - DELLWOOD, MN 55110	41-1675091	N/A	16,125.		0.N/A	NA	EARLY LEARNING SUPPORT
MIS AMIGOS SPANISH IMMERSION LLC 412 5TH AVE N HOPKINS, MN 55343	20-3675365	N/A	13,471.		0.N/A	8/2	BARLY LEARNING SUPPORT
MONTI RIDGE FLATEN 770 HULL RD ANOXA, MN 55303		N/A	5,189.		0.N/A	N/A	BARLY LEARNING SUPPORT
MOUNT CALVARY LUTHERAN CHURCH MOUNT CALVARY PRESCHOOL, 301 COUNTY ROAD 19 - EXCELSIOR, MN	7770787-17	501/01/31	а с		4/N	*/ <u>N</u>	PARATY LEARNING SHEER

ליון מון מחלי במון מ		Sin pilin ciliani ciliani		minol company positive	יתוב ביות חוו ממח"י ב	dirili,	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NENG L XIONG 2509 IRVING AVE N MINNEAPOLIS, MN 55411		W/A	9,343.	N.0	N/A	N/A	PARLY LEARNING SUPPORT
NEW BORIZON CHILD CARE INC 3405 ANNAPOLIS IN N, \$100 PLYMOUTH, MN 55447	41-1569865	N/A	1,869,936,	0.N.A	/a.	N/A	SARLY LEARNING SUPPORT
NICOLE MINKE 8124 CLINTON AVE S BLOOMINGTON, MN 55420	46-2154369	s/A	5,157.	0.N/A	(A	N/A	BARLY LEARNING SUPPORT
NORTHERN VOICES 1660 COUNTY ROAD B W ROSEVILLE, MN 55113	41-1930941	501(0)(3)	13,200.	N. 0	N/A	N/A	SARLY LEARNING SUPPORT
ONE OF A KIND CHILDREN CENTER INC 3612 BLOCMINGTON AVE S MINNEAPOLIS, MN 55407	41-1414987	N/A	6,621.	0	M/A	N/A	HARLY LEARNING SUPPORT
OUR REDEEMER OROMO EVANGELICAL CHURCH - 4000 28TH AVE S - MINNEAPOLIS, MN 55406	41-1770334	501(¢)(3)	10,310.	0.N.A	(A.	K/A	SARLY LEARNING SUPPORT
PARENTS IN COMMUNITY ACTION INC 700 HUMBOLDT AVE N MINNEAPOLIS, MN 55411	41-0956226	501(C)(3)	763,480,	0	N/A	N/A	BARLY LEARNING SUPPORT
PACHWAYS TO PLAY BARLY LEARNING CENTER - 1815 BROMLEY ST - SOUTH ST.PAUL, MN 55075	25-0971859	8/8	6,727.	0,N/A	æ	N/A	BARLY LEARNING SUPPORT
PHYLLIS WHEATLEY COMMUNITY CENTER MARY T WELCOME, 1301 10TH AVE N MINNEAPOLIS MN 55411	2519040-17	507(0)(3)	6 6 6	200	Ę	8/2	MACHETTA CASTAGORE VICES

SMALL	
NK	
THT	

Schedule i (Form 990) THINK SMALL	LL						41-1260581 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	izations in the Ur	ited States (Sche	dule I (Form 990), Pa	(: +	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PILLSBURY UNITED COMMUNITIES 3501 CHICAGO AVE S MINNEAPOLIS, MN 55407	41-0916478	501(C)(3)	6,119.	0	N/2.	N/A	BARLY LEARNING SUPPORT
PROJECT FOR PRIDE IN LIVING INC 1035 E FRANKLIN AVE MINNEAPOLIS, MN 55104	23-7232208	501(C)(3)	18,392.	0	N/A	N/A	BARLY LEARNING SUPPORT
RACHELLE GASHO 1319 MINNEHAHA AVE W ST PAUL, MN 55104	26-1647576	n/a	6,957.	0	N/A	N/A	EARLY LEARNING SUPPORT
RAINBOW CHILD DEVELOPMENT INC ATTN: MARIA MIKEL, 605 COMO AVE ST PAUL, MN 55103	41-1915967	N/A	250,144.	0	N/A	M/A	EARLY LEARNING SUPPORT
RAINBOW MONTESSORI LEARNING CENTER & DAYCARE INC - 8736 NICOLLET AVE S - BLOOMINGTON, MN 55420	41-1511427		24,052,	.0	N/A	N/A	EARLY LEARNING SUPPORT
RICHFIELD EVANGELICAL LUTEERAN CHURCH - 8 W 60TH ST - MINNEAPOLIS, MN 55419	41-0693948	501(¢)(3)	13,756.	.0	4/N	N/A	EARLY LEARNING SUPPORT
ROBBINSDALE AREA SCHOOLS 8301 47TH AVE N NEW HOPE, MN 55428	41-6001408	SCHOOL DISTRICT	138,374.	Ċ	N/A	N/A	BARLY LEARNING SUPPORT
ROBIN'S NEST DAYCARE 210 17TH ST W HASTINGS, MN 55033	90-0748095	N/A	23,942.	0		N/A	EARLY LEARNING SUPPORT
ROOM FOR GROWING INC 268 12TH STREET SW FOREST LAKE, MN 55025	41-1543989	N/A	39,013,	٥.	N/A	N/A	BARLY LEARNING SUPPORT
							Schedule I (Form 990)

5
α
5
C
4
0
-
Ц
5

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	overnments and Orga	nizations in the Ur	nited States (Schi	edule I (Form 990), P		
(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALVATION ARMY KING FAMILY FOUNDAIL - ATTN: BRENDA LINE CHILD DEVELOPMENT CENTER, 401 W 7TH ST - ST PAUL, MN 55102	41-0698597	501(0)(3)	34,617.	٥	2	N/A	PARLY LEARNING SUPPORT
SANDCASTLE I CHILD CARE CENTER 749 JUNO AVE ST PAUL, MN 55102	41-0721706	501(0)(3)	26,440.	0,	N/A	8/8	EARLY LEARNING SUPPORT
SCHOOL READINESS LEARNING ACADEMY 1221 7TH AVE N MINNEAPOLIS, MN 55411	26-3245237	N/A	23,844.	0.	N/A	N/A	SARLY LEARNING SUPPORT
SCOUT CARVER DAKOTA CAP AGENCY INC 712 CANTERBURY RD SHAKOPEE, MN 55379	41-0903890	501(0)(3)	12,357.	0.	0,N/A	N/A	EARLY LEARNING SUPPORT
SEED DAYCARE 1300 OLSON MEMORIAL HWY MINNEAPOLIS, MN 55411	41-1677034	501(C)(3)	6,938.	.0	N/A	N/A	EARLY LEARNING SUPPORT
SEWARD CHILD CARE 2323 32ND AVE S MINNEAPOLIS, MN 55406	41-1240047	501(C)(3)	6,500.	.0.	N/3	N/3	BARLY LEARNING SUPPORT
SHAUNEE OLSON 5471 OBRIEN AVE N OAK PARK HEIGHTS, MN 55082		N/A	6,135,	0.	N/3	N/A	EARLY LEARNING SUPPORT
SHAWN MATTSON 7856 SUGARLOAF TRL BROORLYN PARK, MN 55444	26-1786683	N/A	6,583.	0,	k/k	%/A	BARLY LEARNING SUPPORT
SMILING FACES CHILD DEVELOPMENT CENTER - 8049 ZANE AVE N -	000000000000000000000000000000000000000	Š	0 0 1 0	c	5	V) N	BRANCE DEFENDE

-	1
α	3
L	
C	S
4	5
0	Ų
5	ł
1	
	1

THE COMMITTAIN OF STREET ASSISTANCE DE COMMITTAIN O	Assistante to di	and of the control of				7	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHSIDE FAMILY NURTURING CENTER 2448 18TH AVENUE	1 to	i de la companya de l		· ·	4		
SOUTHWEST METRO EDUCATIONAL COOPERATIVE - DEA EAST CREEK CHILD CARE, 303 6TH ST B - CHASKA, MN		100000000000000000000000000000000000000	, , , , , , , , , , , , , , , , , , ,		41.0	4/8	PANAL MERITANG SUFFURIA
SPECIAL SCHOOL DIST 1 - MINNEAPOLIS - MINNEAPOLIS FUBLIC SCHOOLS, 1250 W BROADWAY AVE - MINNEAPOLIS, MN 55411	41-0851980		831,201.	i o	0.N/A	4/s	BARLY LEARNING SUPPORT
SPECIAL SCHOOL DIST 6 - SOUTH ST PAUL - SOUTH ST PAUL PUBLIC SCHOOLS, ATTN: AARON BUSHBURGER, 104 5TH AVE S - SOUTH ST PAUL, MN	41-6000790	SCHOOL DISTRICT	98,948,	0	N/A	N/A	EARLY LEARNING SUPPORT
SPIRITUAL LIFE BIBLE COLLEGE 6865 SHINGLE CREEK PKWY BROOKLYN CENTER, MN 55430	20-5085101	\$01(C)(3)	11,078.	0	N/A.	8/3	EARLY LEARNING SUPPORT
SRIMATHIE LIYANAPATHIRANAGE 1831 MINNEHAHA AVE E ST PAUL, MN 55119	20-2850881	N/A	8,093.	o.	м/д	N/A	EARLY LEARNING SUPPORT
ST PAUL'S CHILDHOOD CENTER 900 SUMMIT AVE ST PAUL, MN 55105	41-1377467	501(¢)(3)	41,305,	0	0,N/A	N/A	EARLY LEARNING SUPPORT
SUMMIT RARLY LEARNING CENTER 1015 OLSON MEMORIAL HWY MINNEAPOLIS, MN 55405	41-1855935	N/A	14,043,	0	0.N/A	N/A	BARLY LEARNING SUPPORT
SUZANNE E WAGNER. 202 POPLAR STREET W SOUTH ST PAUL. AN 55075.		W/A	6 160.	0	0.N/A	N/A	HARLY LEARNING SUPPORT

7	7	ij
¢	X	3
L	"	
¢	d	2
1	4	
¢	١	q
*		1
	1	
ć	1	j

Service and compared to the control of the control	Assistance to	חשלים מוות כיו אם	יווידמווסווים ווו מומים	lited clates (col	Lengia I (Louil ago), r	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CRAYON BOX CHILD CARE CENTER 7751 EAST RIVER RD FRIDLEY, MN 55432	26-1698534	N/A	5,541.	.0.	6.N/A	K/A	EARLY LEARNING SUPPORT
THE FAMILY PARTNERSHIP 2438 18TH AVE S MINNEAPOLIS, MN 55404	41-0693858	501(C)(3)	370,292.	0.	ਚ/R	4/N	BARLY LEARNING SUPPORT
TINA WHITE 3727 KNOX AVE N MINNEAPOLIS, MN 55412		N/A	5,375.	0,0	a/8.0	N/A	BARLY LEARNING SUPPORT
TINY TOTS & LITTLE TYRES 50 E MARIE AUE, #100 WEST SAINT PAUL, MN 55118	41-1527628	501(C)(3)	20,726.	.0	N/2.	N/A	BARLY LEARNING SUPPORT
TRINEPTE POTTS 3031 QUEEN AVENUE N MINNEAPOLIS, MN 55411	43-2118450	A/A	966,3	0	M/a	#/s	BARLY LEARNING SUPPORT
TUTOR TIME LEARNING CENTER LLC CORPORATE OFFICE & TREASURY DEPT APTN: MELISSA HARRIS 32209 COLLECTION CTR -	36-4500741	N/A	. 86,509.	.0	0.872	N/A	BARLY LBARNING SUPPORT
VANHSY LOR 706 JESSAMINB AVE E ST PAUL, MN 55106		N/A	9,143.		0, M/A	N/B	EARLY LEARNING SUPPORT
WAY TO GROW 125 WEST BROADWAY AVE N, \$110 MINNEAPOLIS, MN 55411	71-0956749	501(0)(3)	72,752,	0	0.N/A	N/A	RARLY LEARNING SUPPORT
XIE CHA 2721 HUMBOLDT AVE N MINNEAPOLIS, NN 55411		N/A	1.17 1.1	o	N/N	R/2	RABLY LEMENTAL CITEDODE

,		
(X	
L	1	
C	7	2
ļ	4	2
	1	
۲		
	1	

(a) Name and address of (b) EIN (c) IRC section organization or government if applicable if applicable structurents and section structurents and section section section if applicable section section with section se	tion (d) Amount of	-la		
N/A 41-0696493 501(C) 41-0693891 501(C)	_	assistance (book, FMV, appraisal, other)	non-cash assistance	(h) Purpose of grant or assistance
41-0696493 501(C)	36,507.	0.N/A	N/A	BARLY LEARNING SUPPORT
41-0693891	62,344.	0.M/A	N/A	BARLY LEARNING SUPPORT
	216,916.	0.N/A	8/3	BARLY LEARNING SUPPORT
ZANG XIONG 2903 PENN AVE N MINNBAPOLIS, MN 55411	15,946.	0.N/A	N/A	BARLY LEARNING SUPPORT

THINK SMALL

Schedule I (Form 990) (2014) THINK SMALL Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Page 2

41-1260581

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	quired in Part I, line	2, Part III, column	(b), and any other ac	dditional information.	
PART I, LINE 2:					
GRANT AND SCHOLARSHIP COORDINATORS		ESTABLISE	ED PROGRAM	EXECUTE ESTABLISHED PROGRAM GUIDELINES	
ACCORDING TO PROGRAM SPECIFICATIONS.	vs.				
GRANTS: ALL GRANT APPLICATIONS ARE	S REVIEWED BY	A	COMMITTEE CONSISTING	SISTING OF	
EARLY CHILDHOOD COMMUNITY REPRESENTATIVES.	TATIVES.	FUNDING A	FUNDING ALLOCATIONS	ARE	
DETERMINED WITH INPUT FROM THE REVIEW COMMITTEE REPRESENTATIVES. GRANTS ARE	TIEW COMMI	TTEE REPR	ESENTATIVE	S. GRANTS ARE	
EXPENDED ONCE GRANT REQUIREMENTS AR	E MET	AND APPROPR	IATE DOCUM	APPROPRIATE DOCUMENTATION HAS	
BEEN RECEIVED.					
432.102 10-15-14		55			Schedule I (Form 990) (2014)

053-5DZ1

SCHEDULE J (Form 990)

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

41-1260581

Department of the Treasury Internal Revenue Service Name of the organization

THINK SMALL

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

OMB No. 1545-0047

	art I Questions Regarding Compensation	_	Yes	No
da	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	1000	165	140
la	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		13 2	21.1
	First-class or charter travel Housing allowance or residence for personal use	100	100	
		7.4	7. 1	9.3
	Travel for companions Payments for business use of personal residence	MY	Y	12.15
	Tax Indemnification and gross-up payments Health or social club dues or initiation fees	189	2.13	400
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	H April	8	- 8
		ide ii	10	112
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	a.	2. 5	1
	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,	priter J.	-	37.80
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
		61 -184		42 3
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	5.836		144
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			9 163
	establish compensation of the CEO/Executive Director, but explain in Part III.	i din	- 61	
	X Compensation committee Written employment contract	14.4		
	X Independent compensation consultant X Compensation survey or study	1	13	10.30
	Form 990 of other organizations X Approval by the board or compensation committee	8.2		100
		300	30.7	11111111
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling		(1)3	
	organization or a related organization;		05	1 400
а	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
~	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	123	(10.00)	560
	The totally of lines have first the persons and provide the applicable allocations of each test in the first in	1110.	i' di	10000
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	1	1	100131
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1,77	12	
5	[2] 전 마다 10 전 10		. 3:	
(51)	contingent on the revenues of:	5a	100	X
	The organization?	5b		X
b	Any related organization?	OD-	117	**
	If "Yes" to line 5a or 5b, describe in Part III.	F 18	L.	115 55 8
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	11	Van it	10 1
	contingent on the net earnings of:	13.74	14 1-	40
	The organization?	6a		X
b	Any related organization?	6b		A
	If "Yes" to line 6a or 6b, describe in Part III.	- 60	T. H.	Cart
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	1, 21	10.10	100
	not described in lines 5 and 67 if "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	digital	W.	Minds :
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	В		X
9	If "Yes" to line 8, dld the organization also follow the rebuttable presumption procedure described in	-24 H	1.150	100

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

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014 THI

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 in 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 are not 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 V	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a)-(i)(a)	reported as deferred in prior Form 990
(1) BARBARA YATES	ε	167,703.	1,710.	396.	5,252.	16,485.	191,546.	0
PRESIDENT AND CEO	(E		0	0	• 0	4		
(2) RAY ABOYAN	Ξ	126,08	0	258.	3,356.	21,669.	151,370.	0.
CHIEF OPERATING OFFICER	E		0	0	.0	0	.0	0
	Θ							
	E							
	Ξ							
	\equiv							
e e	6							
	€							
	Ξ							
	E		Continue			0.000		
	Ξ							
	E							
	ε							
	E							
	8							
	Ξ							
	8							
	(II)						1000	
	ε	7,0						
	Ξ							
	Ξ							
	(E)							
	Ξ							
	E							
	Ξ							
4	(E)							
	(i)							
	(ii)							
	(1)							
	(E)							
453 0 11 0 12				C L		ŧ	Sched	Schedule J (Form 990) 2014

Provide the information, are descriptions required for Part I, lives 1 _{th} , 1b, 3, 4 _{th} , 4b, 4c, 5a, 5b, 5a, 6b, 2b, 7, and 8, and for Part II. Also complete this part for any ediational information. Selection of the complete this part for any ediational information.	Schedule J (Form 990) 2014 I BLIND, SMALLI Part III. Supplemental Information	41-1260581 Page 3
59	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4	b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
69		
29		
69		
69		
56		
29		
65		
69		
65		
59		
55		
		Schedule J (Form 990) 2
	432113 10-18-14	59

SCHEDULE O

(Form 990 or 990-EZ)

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. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990. OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

432211 08-27-14

Name of the organization

THINK SMALL

Employer identification number 41-1260581

TITATE VILLE
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
75 FOREIGN COUNTRIES. APPROXIMATELY 750,000 CATALOGS ARE MAILED TO
CUSTOMERS ANNUALLY.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
COMMUNITY OUTREACH AND ACCESS: THINK SMALL'S MULTILINGUAL OUTREACH
STAFF CONNECT WITH HISTORICALLY UNDERSERVED COMMUNITIES, INCLUDING
THOSE IN LOW INCOME NEIGHBORHOODS, ENGLISH LANGUAGE LEARNERS,
COMMUNITIES OF COLOR, AND IMMIGRANT AND REFUGEE FAMILIES SO THEY CAN
FULLY ENGAGE IN MINNESOTA'S EARLY CHILDHOOD CARE AND EDUCATION SYSTEM.
OUTREACH STAFF WORK TO EXPAND THE REACH OF THINK SMALL SERVICES AND
IDENTIFY NEEDS AND GAPS WITHIN THESE COMMUNITIES. STAFF ASSISTS
FAMILIES AND PROVIDERS NAVIGATING COMPLEX GOVERNMENT SYSTEMS,
CONNECTING THEM TO RESOURCES AND SERVICES AVAILABLE AT THINK SMALL AND
OTHER ORGANIZATIONS.
EXPENSES \$ 477,640. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FAMILY EDUCATION AND REFERRAL: REFERRAL SPECIALISTS ENSURE THAT
FAMILIES ARE AWARE OF THE IMPORTANCE OF SCHOOL READINESS AND THEY
PROVIDE VITAL INFORMATION ON HOW TO IDENTIFY THE BEST CARE AND EARLY
EDUCATION OPTIONS FOR THEIR CHILDREN. REFERRAL SPECIALISTS DIRECTLY
SERVE APPROXIMATELY 3,200 FAMILIES ANNUALLY, WITH OVER 25% BEING
NON-ENGLISH SPEAKING. REFERRALS FROM THINK SMALL TO THE
PARENTAWARERATINGS.ORG PROVIDER SEARCH WEBSITE RESULTED IN 10,503
SESSIONS.
EXPENSES \$ 270,193. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2014)

POLICY, ADVOCACY AND INITIATIVES: THINK SMALL WORKS ACROSS THE STATE

ACTIVATING FIELD LEADERS AND OTHER STAKEHOLDERS ACROSS THE SYSTEM ON

ISSUES THAT CONCERN OUR YOUNGEST CHILDREN. THIS INCLUDES CIVIC

ENGAGEMENT AND PARENT EMPOWERMENT TRAININGS IN A NUMBER OF DIVERSE

CULTURAL, REFUGEE, AND IMMIGRANT COMMUNITIES. THINK SMALL ALSO PLAYS AN

IMPORTANT ROLE IN ADVANCING POLICY INITIATIVES SUCH AS PARENT AWARE AND

EARLY LEARNING SCHOLARSHIPS. BY LEADING FROM THE DEVELOPMENT OF POLICY

CONCEPTS THROUGH THE PILOTING STAGES AND HELPING TAKE PROMISING

INITIATIVES TO SCALE, THE AGENCY HAS HELPED IMPROVE ACCESS TO QUALITY

EARLY LEARNING OPPORTUNITIES AND HELPED BUILD ACCOUNTABILITY IN THE

SYSTEM.

EXPENSES \$ 185,430. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

LIBRARY: THE DEBRA S. FISH EARLY CHILDHOOD LIBRARY AT THINK SMALL IS

AVAILABLE STATEWIDE. NOW NUMBERING OVER 5,500 ITEMS, THE LIBRARY'S

COLLECTION IS A PART OF MINNESOTA'S PUBLIC INTERLIBRARY LOAN SYSTEM AND

MATERIALS CAN BE DELIVERED TO ALL LOCAL LIBRARIES.

EXPENSES \$ 72,306. INCLUDING GRANTS OF \$ 2,378. REVENUE \$ 596.

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

THE EXECUTIVE COMMITTEE CONSISTS OF THE ELECTIVE OFFICERS, THE IMMEDIATE

PAST BOARD CHAIR, THE CHAIRS OF ANY STANDING COMMITTEES OF THE BOARD OF

DIRECTORS, AND OTHER COMMITTEE CHAIRS AT THE DISCRETION OF THE BOARD CHAIR.

THE COMMITTEE SHALL ONLY HAVE THE AUTHORITY OF THE BOARD IN THE MANAGEMENT

OF THE BUSINESS OF THE CORPORATION TO THE EXTENT DETERMINED BY THE BOARD.

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

UPON COMPLETION AND REVIEW BY MANAGEMENT, THE DRAFT 990 FORM WILL GO TO THE FINANCE COMMITTEE FOR REVIEW. UPON THE FINANCE COMMITTEE'S APPROVAL, IT WILL BE SUBMITTED TO THE FULL BOARD FOR FINAL REVIEW AND APPROVAL.

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

ANNUAL NOTIFICATIONS ARE GIVEN TO ALL AFFECTED OFFICERS, DIRECTORS,

TRUSTEES AND KEY EMPLOYEES ALONG WITH A REQUIREMENT FOR A SIGNED CONFLICT

OF INTEREST STATEMENT. THE CONFLICT OF INTEREST POLICY IS DESIGNED TO

IDENTIFY SITUATIONS THAT PRESENT POTENTIAL CONFLICTS OF INTEREST AND TO

PROVIDE THE ORGANIZATION WITH A PROCEDURE WHICH WHEN OBSERVED WILL ALLOW A

TRANSACTION TO BE TREATED AS VALID AND BINDING. ANY RESPONSIBLE MEMBER IS

REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICT OF INTEREST BEFORE THE BOARD OR

COMMITTEE THEREOF WHO SHALL DETERMINE WITHOUT THE INTERESTED INDIVIDUAL IF

A CONFLICT OF INTEREST EXISTS. THE RESPONSIBLE PERSON SHALL REFRAIN FROM

ANY ACTION THAT MAY AFFECT THE ORGANIZATION'S DECISION REGARDING SUCH

CONTRACT OR TRANSACTION AND MAY NOT PARTICIPATE OR HEAR THE BOARD OR

COMMITTEE'S DISCUSSION OF THE MATTER, IS NOT COUNTED FOR THE PRESENCE OF A

QUORUM, AND MAY NOT VOTE. THE ORGANIZATION DOCUMENTS PROCEEDINGS RELATED TO

CONFLICTS OF INTEREST IN THE MEETING MINUTES OR AS OTHERWISE APPROPRIATE.

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

COMPENSATION WAS VERIFIED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF

DIRECTORS AND AN EXTERNAL SEARCH FIRM WAS RETAINED FOR THE PURPOSES OF

PROVIDING INDEPENDENT MARKET SURVEY DATA. THE PROCESS AND DETERMINATION ARE

DOCUMENTED IN THE EXECUTIVE COMMITTEE MEETING MINUTES. THE LAST EXTERNAL

COMPENSATION REVIEW PROCESS WAS DONE IN 2013 FOR THE PRESIDENT & CEO, B.

YATES.