

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

2019
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **JUL 1, 2019** and ending **JUN 30, 2020**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THINK SMALL Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 10 YORKTON COURT City or town, state or province, country, and ZIP or foreign postal code SAINT PAUL, MN 55117	D Employer identification number 41-1260581 E Telephone number (651) 641-0305
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 30,346,159.
J Website: ▶ WWW.THINKSMALL.ORG		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1975 M State of legal domicile: MN

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: TO ADVANCE QUALITY CARE AND EDUCATION OF CHILDREN IN THEIR CRUCIAL EARLY YEARS.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3	18
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	119
	6	Total number of volunteers (estimate if necessary)	6	87
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, line 39	7b	0.
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year
9		Program service revenue (Part VIII, line 2g)	30,203,617.	27,014,489.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	370,322.	276,810.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	242.	10,316.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,272,216.	2,090,847.
			32,846,397.	29,392,462.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	24,914,453.	21,257,973.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,225,715.	5,928,267.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 314,491.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,218,089.	2,901,528.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	34,358,257.	30,087,768.
	19	Revenue less expenses. Subtract line 18 from line 12	-1,511,860.	-695,306.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	9,999,840.	8,651,582.
	22	Net assets or fund balances. Subtract line 21 from line 20	6,032,241.	5,455,769.
		3,967,599.	3,195,813.	

Part II Signature Block

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

Sign Here	Signature of officer BARBARA YATES, PRESIDENT & CEO Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name SARAH REICHLING Preparer's signature SARAH REICHLING Date 05/05/21 Check if self-employed <input type="checkbox"/> PTIN P01587996 Firm's name ▶ CLIFTONLARSONALLEN LLP Firm's EIN ▶ 41-0746749 Firm's address ▶ 220 S 6TH STREET, SUITE 300 MINNEAPOLIS, MN 55402 Phone no. 612-376-4500	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO ADVANCE QUALITY CARE AND EDUCATION OF CHILDREN IN THEIR CRUCIAL EARLY YEARS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 21,420,154. including grants of \$ 19,265,441.) (Revenue \$ 755,041.) STRENGTHEN FAMILIES: FAMILY ENGAGEMENT THINK SMALL IS COMMITTED TO STRENGTHENING FAMILY'S ACCESS TO HIGH QUALITY CARE AS WELL AS INCREASING THEIR KNOWLEDGE ABOUT EARLY CHILDHOOD DEVELOPMENT AND PREPARING CHILDREN FOR KINDERGARTEN.

4b (Code:) (Expenses \$ 6,761,158. including grants of \$ 1,992,532.) (Revenue \$ 1,373,399.) PREPARE PROVIDERS: PROFESSIONAL DEVELOPMENT, CONSULTATION, AND COACHING THINK SMALL PROVIDES METRO-WIDE PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOCUSED ON THE ESSENTIAL ELEMENTS OF HIGH QUALITY CARE.

4c (Code:) (Expenses \$ 215,656. including grants of \$ 0.) (Revenue \$ 2,559.) CATALYZE CHANGE: BEANSTALK: THINK SMALL HAS AN INNOVATION LAB WHERE HIGH-POTENTIAL SERVICES ARE DEVELOPED, IMPLEMENTED AND WHEN MERITED, SCALED, WITH THE END GOAL OF ENSURING EVERY CHILD IN MINNESOTA IS READY FOR KINDERGARTEN.

THINK SMALL PARTICIPATES IN A VARIETY OF STATE AND NATIONAL EARLY LEARNING POLICY COALITIONS AND WORKGROUPS AND PLAYS AN IMPORTANT ROLE IN ADVANCING POLICY EFFORTS SUCH AS PARENT AWARE, EARLY LEARNING SCHOLARSHIPS, CHILD CARE ASSISTANCE AND MOST RECENTLY THE ECONOMIC DEVELOPMENT OF THE CHILD CARE SECTOR.

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

4e Total program service expenses 28,396,968.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organization reporting, compensation, tax-exempt bonds, and business transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 18; 1b Enter the number of voting members included on line 1a... 18; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? X; 8b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O... X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13... X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done... X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official... X; 15b Other officers or key employees of the organization... X; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b 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

- 17 List the states with which a copy of this Form 990 is required to be filed MN
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
MARK CROSS - 651-641-6619
10 YORKTON COURT, SAINT PAUL, MN 55117

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BARBARA YATES PRESIDENT AND CEO	50.00			X			192,009.	0.	16,199.	
(2) E. MARK CROSS CHIEF OPERATING OFFICER	40.00				X		168,380.	0.	7,741.	
(3) CISA KELLER SVP EC QUALITY DEVELOPMENT	40.00					X	106,211.	0.	8,714.	
(4) ROBBIN JOHNSON CHAIR	1.00	X		X			0.	0.	0.	
(5) TANYA SKOGERBOE VICE CHAIR	1.00	X		X			0.	0.	0.	
(6) MARGEUX KING SECRETARY	1.00	X		X			0.	0.	0.	
(7) SARAH WADE TREASURER	1.00	X		X			0.	0.	0.	
(8) ANDRE DUKES DIRECTOR	1.00	X					0.	0.	0.	
(9) ANDREA STERN DIRECTOR	1.00	X					0.	0.	0.	
(10) ARTHUR ROLNICK DIRECTOR	1.00	X					0.	0.	0.	
(11) FRED SENN DIRECTOR	1.00	X					0.	0.	0.	
(12) JAYLON ROSENBLUM DIRECTOR	1.00	X					0.	0.	0.	
(13) JIM SPARKS DIRECTOR	1.00	X					0.	0.	0.	
(14) KAREN HILDING DIRECTOR	1.00	X					0.	0.	0.	
(15) MARIAM MOHAMED DIRECTOR	1.00	X					0.	0.	0.	
(16) MARILYN BURNETT DIRECTOR	1.00	X					0.	0.	0.	
(17) MARSHALL JOHNSON DIRECTOR	1.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MEGAN GUNNAR DIRECTOR	1.00	X						0.	0.	0.
(19) TRACY NORDSTROM DIRECTOR	1.00	X						0.	0.	0.
(20) WESTON MERRICK DIRECTOR	1.00	X						0.	0.	0.
(21) YOLANDA MAJORS DIRECTOR	1.00	X						0.	0.	0.
1b Subtotal							466,600.	0.	32,654.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							466,600.	0.	32,654.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **3**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MYTECH PARTNERS INC 300 2ND STREET NW, NEW BRIGHTON, MN 55112	IT SUPPORT	302,921.
VERSA PRESS INC., 1465 SPRING BAY ROAD, EAST PEORIA, IL 61611-9788	PRINTING & BINDING BOOKS	270,771.
THE DINGLEY PRESS INC CL 300028 PO BOX 16019, LEWISTON, ME 04243	RLP MAILINGS	156,336.
FRY COMMUNICATIONS INC 800 W CHURCH RD, MECHANICSBURG, PA 17055	RLP MAILINGS	118,508.

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 **5**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	25,102,539.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,911,950.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 1,729.				
	h Total. Add lines 1a-1f			27,014,489.			
Program Service Revenue	2 a PROFESSIONAL DEVELOPME	Business Code	624410	266,867.	266,867.		
	b OTHER PROGRAM REVENUE		900099	9,943.	9,943.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			276,810.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			9,672.		9,672.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties			60,902.		60,902.	
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	82,442.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	81,798.				
c Gain or (loss)	7c	644.					
d Net gain or (loss)			644.		644.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a		2,726,088.				
			871,899.				
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory			1,854,189.	1,854,189.			
Miscellaneous Revenue	11 a MISCELLANEOUS REVENUE	Business Code	900099	175,756.		175,756.	
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			175,756.			
12 Total revenue. See instructions			29,392,462.	2,130,999.	0.	246,974.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	19,274,062.	19,274,062.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,983,911.	1,983,911.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	379,280.	137,047.	189,360.	52,873.
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	4,653,018.	4,133,718.	357,233.	162,067.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	138,306.	121,860.	13,424.	3,022.
9 Other employee benefits	397,589.	335,163.	51,252.	11,174.
10 Payroll taxes	360,074.	306,757.	39,087.	14,230.
11 Fees for services (nonemployees):				
a Management				
b Legal	4,444.	743.	3,701.	
c Accounting	24,449.	4,089.	20,360.	
d Lobbying	9,371.		9,371.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	648,934.	302,905.	341,023.	5,006.
12 Advertising and promotion	355,285.	345,038.	9,969.	278.
13 Office expenses	601,056.	545,063.	42,113.	13,880.
14 Information technology	136,175.	62,561.	68,295.	5,319.
15 Royalties				
16 Occupancy	340,201.	259,249.	72,883.	8,069.
17 Travel	63,587.	52,836.	5,014.	5,737.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	48,613.	47,627.	638.	348.
20 Interest	13,153.	4,866.	8,014.	273.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	488,853.	412,701.	69,250.	6,902.
23 Insurance	69,888.	22,555.	46,361.	972.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CREDIT CARD/BANK FEES	45,664.	32,574.	10,154.	2,936.
b BAD DEBT EXPENSE (RECOV	33,931.		15,178.	18,753.
c SUBSCRIPTIONS AND DUES	8,448.	5,005.	2,565.	878.
d IN-KIND SUPPLIES	1,729.			1,729.
e All other expenses _____	7,747.	6,638.	1,064.	45.
25 Total functional expenses. Add lines 1 through 24e	30,087,768.	28,396,968.	1,376,309.	314,491.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	940,612.	1	351,158.
	2 Savings and temporary cash investments	50,132.	2	
	3 Pledges and grants receivable, net	191,025.	3	322,100.
	4 Accounts receivable, net	4,279,372.	4	3,587,906.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	488,884.	8	476,142.
	9 Prepaid expenses and deferred charges	125,800.	9	154,587.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,230,392.		
	b Less: accumulated depreciation	10b 3,167,046.	1,035,934.	10c 1,063,346.
	11 Investments - publicly traded securities	900,549.	11	904,139.
	12 Investments - other securities. See Part IV, line 11	799,475.	12	704,920.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets	6,048.	14	3,707.
	15 Other assets. See Part IV, line 11	1,182,009.	15	1,083,577.
16 Total assets. Add lines 1 through 15 (must equal line 33)	9,999,840.	16	8,651,582.	
Liabilities	17 Accounts payable and accrued expenses	4,866,201.	17	3,340,026.
	18 Grants payable		18	
	19 Deferred revenue	977,525.	19	1,240,250.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	188,515.	23	426,093.
	24 Unsecured notes and loans payable to unrelated third parties		24	449,400.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	6,032,241.	26	5,455,769.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	3,691,206.	27	2,694,347.
	28 Net assets with donor restrictions	276,393.	28	501,466.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	3,967,599.	32	3,195,813.
33 Total liabilities and net assets/fund balances	9,999,840.	33	8,651,582.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	29,392,462.
2	Total expenses (must equal Part IX, column (A), line 25)	2	30,087,768.
3	Revenue less expenses. Subtract line 2 from line 1	3	-695,306.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,967,599.
5	Net unrealized gains (losses) on investments	5	-76,480.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,195,813.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form **990** (2019)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization THINK SMALL	Employer identification number 41-1260581
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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 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 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)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **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.**
 - 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.**
 - 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.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	30,084,013.	31,341,634.	30,886,658.	30,180,011.	27,014,489.	149,506,805.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	30,084,013.	31,341,634.	30,886,658.	30,180,011.	27,014,489.	149,506,805.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						149,506,805.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	30,084,013.	31,341,634.	30,886,658.	30,180,011.	27,014,489.	149,506,805.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	53,255.	31,340.	53,791.	35,121.	70,574.	244,081.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	28,612.	53,609.	27,919.	27,916.	175,756.	313,812.
11 Total support. Add lines 7 through 10						150,064,698.
12 Gross receipts from related activities, etc. (see instructions)					12	19,069,490.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	99.63 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	99.73 %
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included 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.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 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	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Part VI

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

Multiple horizontal lines for providing supplemental information.

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

OMB No. 1545-0047

2019

Name of the organization

THINK SMALL

Employer identification number

41-1260581

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

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	MINNESOTA DEPARTMENT OF EDUCATION 1500 HIGHWAY 36 WEST ROSEVILLE, MN 55113	\$ 17,012,928.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	MINNESOTA DEPARTMENT OF HUMAN SERVICES 444 LAFAYETTE RD ST. PAUL, MN 55155	\$ 4,234,674.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	HENNEPIN COUNTY 300 SOUTH SIXTH STREET MINNEAPOLIS, MN 55487	\$ 3,032,176.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Part II Noncash Property (see instructions). Use duplicate copies of Part 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
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization	Employer identification number 41-1260581
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THINK SMALL

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

If the organization answered "Yes," on 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," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying 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," on 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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <p style="text-align: center;">THINK SMALL</p>	Employer identification number <p style="text-align: center;">41-1260581</p>
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ▶ \$ 0.
- 3 Volunteer hours for political campaign activities 0.

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ 0.
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. **Schedule C (Form 990 or 990-EZ) 2019**

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	113,563.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	37,854.													
c	Total lobbying expenditures (add lines 1a and 1b)	151,417.													
d	Other exempt purpose expenditures	30,087,768.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	30,239,185.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	130,887.	95,014.	91,999.	151,417.	469,317.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	105,143.	92,528.	88,410.	113,563.	399,644.

Schedule C (Form 990 or 990-EZ) 2019

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)).

	(a)		(b)
	Yes	No	Amount
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:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
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			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2019

Open to Public Inspection

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

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

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

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2019

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		205,000.		205,000.
b Buildings		2,750,902.	2,235,976.	514,926.
c Leasehold improvements				
d Equipment		1,261,694.	931,070.	330,624.
e Other		12,796.		12,796.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,063,346.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) WHITEBOX RELATIVE VALUE FUND, LTD.	406,669.	END-OF-YEAR MARKET VALUE
(B) WHITEBOX CREDIT FUND, LTD.	298,251.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	704,920.	

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) SECURITY DEPOSITS	6,119.
(2) CAPITALIZED DEVELOPMENT COSTS, NET	1,077,458.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	1,083,577.

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

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

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

1	Total revenue, gains, and other support per audited financial statements	1	30,187,881.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-76,480.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	871,899.
e	Add lines 2a through 2d	2e	795,419.
3	Subtract line 2e from line 1	3	29,392,462.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	29,392,462.

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

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

1	Total expenses and losses per audited financial statements	1	30,959,667.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	871,899.
e	Add lines 2a through 2d	2e	871,899.
3	Subtract line 2e from line 1	3	30,087,768.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	30,087,768.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE ORGANIZATION IS A MINNESOTA NONPROFIT CORPORATION AND IS EXEMPT FROM

INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND

APPLICABLE MINNESOTA STATUTES, EXCEPT TO THE EXTENT IT HAS TAXABLE INCOME

FROM BUSINESSES THAT ARE NOT RELATED TO ITS EXEMPT PURPOSE. MANAGEMENT

BELIEVES THE ORGANIZATION DID NOT HAVE ANY UNRELATED BUSINESS INCOME IN

THE YEARS ENDED JUNE 30, 2020 OR 2019.

THE ORGANIZATION FOLLOWS THE INCOME TAX STANDARD REGARDING THE RECOGNITION

AND MEASUREMENT OF UNCERTAIN TAX POSITIONS. THE ORGANIZATION IS NOT AWARE

OF ANY UNCERTAIN TAX POSITIONS IT HAS TAKEN. IT IS NOT CURRENTLY UNDER

EXAMINATION BY ANY TAXING JURISDICTION, FEDERAL AND STATE TAX AUTHORITIES

Part XIII Supplemental Information *(continued)*

HAVE THE RIGHT TO EXAMINE RETURNS FOR A PERIOD OF THREE YEARS AFTER THEY

ARE FILED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD 871,899.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD 871,899.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

Employer identification number

THINK SMALL

41-1260581

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENT	N/A	704,920.
3 a Subtotal	0	0			704,920.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			704,920.

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

Schedule F (Form 990) 2019

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Schedule F (Form 990) 2019

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Multiple horizontal lines for supplemental information.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

THINK SMALL

Employer identification number

41-1260581

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
JAIN ENTERPRISES 10210 LANCASTER LN N MAPLE GROVE, MN 55369	04-3775230		32,189.	0.	N/A	N/A	GRANTS
APPLESEED MONTESSORI SCHOOL & CHILD CARE CENTER, INC. - 6601 BLOOMINGTON AVE S - RICHFIELD, MN 55423	16-1723359		13,320.	0.	N/A	N/A	GRANTS
MIS AMIGOS SPANISH IMMERSION LLC 412 5TH AVE N HOPKINS, MN 55343	20-3675365		32,320.	0.	N/A	N/A	GRANTS
PEACEFUL HEIGHTS MONTESSORI SCHOOL & DAY CARE - 375 E MARIE AVE - WEST ST PAUL, MN 55118	20-4487742		5,741.	0.	N/A	N/A	GRANTS
BABYS SPACE A PLACE TO GROW 2438 18TH AVE S MINNEAPOLIS, MN 55404	20-4502788	501C3	276,913.	0.	N/A	N/A	GRANTS
SPIRITUAL LIFE BIBLE COLLEGE 6865 SHINGLE CREEK PKWY BROOKLYN CENTER, MN 55430	20-5085101	501C3	21,940.	0.	N/A	N/A	GRANTS

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 74.
- 3** Enter total number of other organizations listed in the line 1 table ▶ 163.

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

Schedule I (Form 990) (2019)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
PRIMROSE SCHOOL OF CHAMPLIN PARK 10051 XENIA AVE N BROOKLYN PARK, MN 55443	20-5138005		32,777.	0.	N/A	N/A	GRANTS
CHILDREN OF TOMORROW LEARNING CENTER, WACONIA INC - 410 10TH ST E - WACONIA, MN 55387	20-5920734		15,000.	0.	N/A	N/A	GRANTS
KALEIDOSCOPE PLACE 2400 PARK AVE MINNEAPOLIS, MN 55404	20-8449852	501C3	68,560.	0.	N/A	N/A	GRANTS
COMMUNITY ACTION PARTNERSHIP OF RAMSEY & WASHINGTON COUNTY (CAPRW) - 1250 FIFIELD AVE - SAINT PAUL, MN 55108	23-7392142	501C3	7,500.	0.	N/A	N/A	GRANTS
PATHWAYS TO PLAY EARLY LEARNING CENTER - 1815 BROMLEY ST - SOUTH SAINT PAUL, MN 55075	26-0971859		11,404.	0.	N/A	N/A	SCHOLARSHIPS
THE CRAYON BOX CHILD CARE 7751 EAST RIVER ROAD FRIDLEY, MN 55432	26-1698534		13,611.	0.	N/A	N/A	SCHOLARSHIPS
CASA DE CORAZON INC 8351 ELM CREEK BLVD N MAPLE GROVE, MN 55369	26-2862666		27,088.	0.	N/A	N/A	SCHOLARSHIPS
SCHOOL READINESS LEARNING ACADEMY 2503 LOWRY AVE N MINNEAPOLIS, MN 55411	26-3245237		110,380.	0.	N/A	N/A	SCHOLARSHIPS
ELIM PRESCHOOL/ELIM BAPTIST CHURCH 685 13TH AVE NE MINNEAPOLIS, MN 55413	26-3996303	501C3	7,500.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
CREATIVE KIDS ACADEMY 855 VILLAGE CENTER DR #382 SAINT PAUL, MN 55127	26-4136621		27,221.	0.	N/A	N/A	SCHOLARSHIPS
STIM LEARNING CENTER 1201 W BROADWAY MINNEAPOLIS, MN 55411	26-4379274		74,675.	0.	N/A	N/A	SCHOLARSHIPS
TWIN CITIES CHILD CARE CENTER INC 1925 PORTLAND AVE SO MINNEAPOLIS, MN 55404	27-0297780		38,041.	0.	N/A	N/A	SCHOLARSHIPS
RAYITO DE SOL SPANISH IMMERSION 1601 NICOLLET AVE MINNEAPOLIS, MN 55403	27-0524684		36,504.	0.	N/A	N/A	SCHOLARSHIPS
OPEN ARMS EARLY EDUCATION & CHILD CARE CENTER - 3355 HIAWATHA AVE S - MINNEAPOLIS, MN 55406	27-1123534		39,139.	0.	N/A	N/A	SCHOLARSHIPS
MAYFLOWER EARLY CHILDHOOD CENTER 106 E DIAMOND LK RD MINNEAPOLIS, MN 55419	27-1543720	501C3	52,475.	0.	N/A	N/A	SCHOLARSHIPS
LEARN AND GROW CCC 1201 89TH AVE NE 120 BLAINE, MN 55434	27-2156592		7,452.	0.	N/A	N/A	SCHOLARSHIPS
CHOO CHOO MONTESSORI LLC 2617 DULUTH ST MAPLEWOOD, MN 55109	27-2894890		34,125.	0.	N/A	N/A	SCHOLARSHIPS
FINLEY JOAN MARIE (KIDSPLACE CHILDCARE) - 14884 DUNDEE AVE - APPLE VALLEY, MN 55124	34-8541384		5,031.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
TUTOR TIME LEARNING CENTERS 3251 110TH AVENUE CHAMPLIN, MN 55316	36-4500741		195,817.	0.	N/A	N/A	SCHOLARSHIPS
HALLIE Q BROWN EARLY LEARNING CENTER - 270 N KENT ST - SAINT PAUL, MN 55102	41-0693846	501C3	12,180.	0.	N/A	N/A	SCHOLARSHIPS
THE FAMILY PARTNERSHIP 414 EIGHTH STREET SOUTH MINNEAPOLIS, MN 55404	41-0693858	501C3	192,074.	0.	N/A	N/A	SCHOLARSHIPS
MINNEHAHA ACADEMY PRESCHOOL 4200 W RIVER PKWY ROOM 107 MINNEAPOLIS, MN 55406	41-0693870		13,855.	0.	N/A	N/A	SCHOLARSHIPS
WILDER CHILD DEVELOPMENT CENTER 911 LAFOND AVE SAINT PAUL, MN 55104	41-0693889	501C3	56,515.	0.	N/A	N/A	SCHOLARSHIPS
YWCA OF MINNEAPOLIS 1130 NICOLLET MALL MINNEAPOLIS, MN 55403	41-0693891	501C3	263,574.	0.	N/A	N/A	SCHOLARSHIPS
RICHFIELD EVANGELICAL LUTHERAN CHURCH - 8 W 60TH ST - MINNEAPOLIS, MN 55419	41-0693948	501C3	31,349.	0.	N/A	N/A	SCHOLARSHIPS
SALVATION ARMY CDC (THE) 401 W 7TH ST SAINT PAUL, MN 55102	41-0698597	501C3	22,694.	0.	N/A	N/A	SCHOLARSHIPS
FAITHFUL BEGINNINGS AT IMMACULATE CONCEPTION CATHOLIC SCHOOL - 4030 JACKSON ST NE - COLUMBIA HEIGHTS, MN 55421	41-0703859	501C3	9,848.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
UNION GOSPEL MISSION CHILD DEVELOPMENT CENTER - 109 E 9TH ST - SAINT PAUL, MN 55101	41-0705847	501C3	6,214.	0.	N/A	N/A	SCHOLARSHIPS
MARY T WELLCOME CHILD DEVELOPMENT CENTER - 1301 10TH AVE N - MINNEAPOLIS, MN 55411	41-0706132	501C3	51,926.	0.	N/A	N/A	SCHOLARSHIPS
SANDCASTLE CHILD CARE CENTER II 486 VIEW ST SAINT PAUL, MN 55102	41-0721706	501C3	32,320.	0.	N/A	N/A	SCHOLARSHIPS
KIDS KORNER 384 E ROSELAWN AVE MAPLEWOOD, MN 55117	41-0773779	501C3	18,895.	0.	N/A	N/A	SCHOLARSHIPS
ST JOHNS CHURCH OF LITTLE CANADA 380 LITTLE CANADA RD LITTLE CANADA, MN 55113	41-0781158	501C3	24,257.	0.	N/A	N/A	SCHOLARSHIPS
OPEN ARMS LUTHERAN CHILD DEVELOPMENT CENTER - 616 RUTH ST - SAINT PAUL, MN 55119	41-0823000	501C3	15,000.	0.	N/A	N/A	SCHOLARSHIPS
SACRED HEART PARISH/SCHOOL 4050 HUBBARD AVE N ROBBINSDALE, MN 55422	41-0834785	501C3	11,859.	0.	N/A	N/A	SCHOLARSHIPS
FAITHFUL BEGINNINGS AT ST PETER CATHOLIC SCHOOL - 2620 N MARGARET ST - NORTH ST PAUL, MN 55109	41-0838644		11,068.	0.	N/A	N/A	SCHOLARSHIPS
FAITHFUL BEGINNINGS AT ST ALPHONSUS CATHOLIC SCHOOL - 7031 HALIFAX AVE - BROOKLYN CENTER, MN 55429	41-0846441		60,969.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
TEEN PARENT SERVICES LONGFELLOW 3017 EAST 31ST STREET MINNEAPOLIS, MN 55406	41-0851980	501C3	21,002.	0.	N/A	N/A	SCHOLARSHIPS
MOUNT CALVARY PRESCHOOL 301 CTY RD 19 EXCELSIOR, MN 55331	41-0870777	501C3	5,964.	0.	N/A	N/A	SCHOLARSHIPS
LUTHERS LITTLE EXPLORERS 315 15TH AVE N SOUTH ST PAUL, MN 55075	41-0871452		11,895.	0.	N/A	N/A	SCHOLARSHIPS
FAMILIES TOGETHER 709 UNIVERSITY AVE W SAINT PAUL, MN 55104	41-0874507	501C3	22,500.	0.	N/A	N/A	SCHOLARSHIPS
COMMUNITY ACTION PARTNERSHIP OF RAMSEY & WASHINGTON COUNTY (CAPRW) - 450 SYNDICATE ST N - SAINT PAUL, MN 55104	41-0883443	501C3	267,574.	0.	N/A	N/A	SCHOLARSHIPS
PILLSBURY HOUSE EARLY EDUCATION CENTER - 3501 CHICAGO AVE S - MINNEAPOLIS, MN 55407	41-0916478	501C3	6,200.	0.	N/A	N/A	SCHOLARSHIPS
THE CHILDRENS CENTER 605 JAMES AVE ALBERT LEA, MN 56007	41-0954380		42,505.	0.	N/A	N/A	SCHOLARSHIPS
PARENTS IN COMMUNITY ACTION INC 700 HUMBOLDT AVE N MINNEAPOLIS, MN 55411	41-0956226	501C3	470,603.	0.	N/A	N/A	SCHOLARSHIPS
LA CRECHE EARLY CHILDHOOD CENTERS INC - 300 SOUTH CEDAR LAKE ROAD - MINNEAPOLIS, MN 55411	41-0958652	501C3	327,591.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
SEWARD CHILD CARE CENTER 2323 32ND AVE S MINNEAPOLIS, MN 55406	41-1240047	501C3	7,500.	0.	N/A	N/A	SCHOLARSHIPS
COMO EARLY LEARNING CENTER 1024 27TH AVE SE MINNEAPOLIS, MN 55414	41-1250693	501C3	7,500.	0.	N/A	N/A	SCHOLARSHIPS
SIEMBRA MONTESSORI 1915 CHICAGO AVE MINNEAPOLIS, MN 55404	41-1290349	501C3	7,500.	0.	N/A	N/A	SCHOLARSHIPS
BROOKDALE CHRISTIAN CENTER DAYCARE 6030 XERXES AVE N BROOKLYN CENTER, MN 55430	41-1298917	501C3	7,500.	0.	N/A	N/A	SCHOLARSHIPS
CATHOLIC CHARITIES OF THE ARCHDIOCESE OF ST PAUL AND MINNEAPOLIS - 1200 2ND AVENUE SOUTH - MINNEAPOLIS, MN 55403	41-1302487	501C3	205,687.	0.	N/A	N/A	SCHOLARSHIPS
ESPECIALLY FOR CHILDREN 5133 W 98TH ST BLOOMINGTON, MN 55437	41-1318998		163,874.	0.	N/A	N/A	SCHOLARSHIPS
LITTLE VOYAGEURS MONTESSORI SCHOOL INC - 825 51ST AVE NE - COLUMBIA HEIGHTS, MN 55421	41-1327355	501C3	14,973.	0.	N/A	N/A	SCHOLARSHIPS
LIVING CHRIST EARLY LEARNING CENTER - 820 LAKE DR - CHANHASSEN, MN 55317	41-1340011		14,970.	0.	N/A	N/A	SCHOLARSHIPS
FAMILYWISE SERVICES 3036 UNIVERSITY AVE SE MINNEAPOLIS, MN 55414	41-1343909	501C3	14,093.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
CORNERSTONE MONTESSORI SCHOOL 1611 AMES AVE SAINT PAUL, MN 55106	41-1361913	501C3	51,570.	0.	N/A	N/A	SCHOLARSHIPS
CHILDRENS DISCOVERY ACADEMY OF EARLY LEARNING - 3665 TALMAGE CIRCLE - VADNAIS HEIGHTS, MN 55110	41-1391058		67,382.	0.	N/A	N/A	SCHOLARSHIPS
SUNNY HOLLOW MONTESSORI 636 S MISSISSIPPI RIVER BLVD SAINT PAUL, MN 55116	41-1408529	501C3	12,950.	0.	N/A	N/A	SCHOLARSHIPS
HOPKINS EARLY LEARNING CENTER 125 MONROE AVE S HOPKINS, MN 55343	41-1408605	501C3	7,500.	0.	N/A	N/A	SCHOLARSHIPS
ST DAVIDS CENTER FOR CHILD & FAMILY DEVELOPMENT - 3395 PLYMOUTH RD - MINNETONKA, MN 55305	41-1429208	501C3	61,139.	0.	N/A	N/A	SCHOLARSHIPS
A CHANCE TO GROW INC 1800 2ND ST NE MINNEAPOLIS, MN 55418	41-1444113		7,270.	0.	N/A	N/A	SCHOLARSHIPS
TINY TOTS & LITTLE TYKES 60 E MARIE AVE STE 100 WEST ST PAUL, MN 55118	41-1527628	501C3	14,015.	0.	N/A	N/A	SCHOLARSHIPS
NEW HORIZON CHILD CARE INC 3405 ANNAPOLIS LANE NORTH, SUITE 10 PLYMOUTH, MN 55447	41-1569865		3,690,545.	0.	N/A	N/A	SCHOLARSHIPS
ANEW DIMENSION CHILD ENRICHMENT CENTER - 1819 MINNEHAHA AVE - MINNEAPOLIS, MN 55404	41-1628289	501C3	81,161.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
CAROL MATHEYS CENTER FOR CHILDREN & FAMILIES - 6060 43RD ST N - OAKDALE, MN 55128	41-1647445	501C3	7,500.	0.	N/A	N/A	SCHOLARSHIPS
ZOE CHILD CARE CENTER 6345 XERXES AVE S RICHFIELD, MN 55423	41-1658986	501C3	12,665.	0.	N/A	N/A	SCHOLARSHIPS
HMOOB TOJ SIAB CHILDRENS HOUSE 240 PLATO BLVD E SAINT PAUL, MN 55107	41-1667580	501C3	34,432.	0.	N/A	N/A	SCHOLARSHIPS
MOTHER DUCK LEARNING CENTER 6341 PENN AVE S RICHFIELD, MN 55423	41-1671453		6,160.	0.	N/A	N/A	SCHOLARSHIPS
MINIAPPLE INTERNATIONAL MONTESSORI 1875 W PERIMETER DR ROSEVILLE, MN 55113	41-1675091		13,438.	0.	N/A	N/A	SCHOLARSHIPS
SEED EARLY LEARNING ACADEMY 1300 OLSON MEMORIAL HWY MINNEAPOLIS, MN 55411	41-1677034	501C3	29,268.	0.	N/A	N/A	SCHOLARSHIPS
ST THOMAS MORE PRESCHOOL 1065 SUMMIT AVE SAINT PAUL, MN 55105	41-1691889		40,632.	0.	N/A	N/A	SCHOLARSHIPS
STEP BY STEP MONTESSORI OF PLYMOUTH - 4355 HIGHWAY 169 - PLYMOUTH, MN 55442	41-1700728		11,761.	0.	N/A	N/A	SCHOLARSHIPS
SAUK RAPIDS PLAYHOUSE CHILD CARE CENTER INC - 2901 CLEARWATER RD - SAINT CLOUD, MN 56301	41-1732258		5,281.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
PEACE OF MIND DAYCARE, INC. 9025 TAMARACK RD WOODBURY, MN 55125	41-1739539		13,351.	0.	N/A	N/A	SCHOLARSHIPS
LUBAVITCH EARLY CHILDHOOD CENTER 1778 FORD PKWY SAINT PAUL, MN 55116	41-1763738	501C3	32,801.	0.	N/A	N/A	SCHOLARSHIPS
STEP BY STEP MONTESSORI BROOKLYN PARK - 8455 W BROADWAY AVE N - BROOKLYN PARK, MN 55455	41-1784119		71,692.	0.	N/A	N/A	SCHOLARSHIPS
JEREMIAH PROGRAM 1510 LAUREL AVE STE 100 MINNEAPOLIS, MN 55403	41-1801834	501C3	16,713.	0.	N/A	N/A	SCHOLARSHIPS
STEP BY STEP MONTESSORI MAPLE GROVE - 11601 73RD AVE N - MAPLE GROVE, MN 55369	41-1801946		34,608.	0.	N/A	N/A	SCHOLARSHIPS
DAY BY DAY CHILD DEVELOPMENT CENTER INC - 1565 CLIFF RD STE 9 - EAGAN, MN 55122	41-1845964	501C3	17,276.	0.	N/A	N/A	SCHOLARSHIPS
CLOSE TO MY HEART 1740 VAN DYKE ST ATTN ANNE HENNESSE MAPLEWOOD, MN 55109	41-1847732	501C3	68,545.	0.	N/A	N/A	SCHOLARSHIPS
SUMMIT EARLY LEARNING CENTER 1015 OLSON MEMORIAL HWY MINNEAPOLIS, MN 55405	41-1855935		27,413.	0.	N/A	N/A	SCHOLARSHIPS
STEP BY STEP MONTESSORI OF CHASKA 1485 WHITE OAK DR CHASKA, MN 55318	41-1866485		5,768.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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WORLD AROUND US CHILD CARE 5065 STEWART AVE WHITE BEAR LAKE, MN 55110	41-1887084		41,384.	0.	N/A	N/A	SCHOLARSHIPS
AGAPE EMERSON 2304 EMERSON AVE N MINNEAPOLIS, MN 55411	41-1914493	501C3	7,891.	0.	N/A	N/A	SCHOLARSHIPS
LOVE TO GROW ON 6499 LAKOTA TRL LINO LAKES, MN 55014	41-1915522		16,315.	0.	N/A	N/A	SCHOLARSHIPS
RAINBOW CHILD DEVELOPMENT CENTER 605 COMO AVE SAINT PAUL, MN 55103	41-1915967		52,636.	0.	N/A	N/A	SCHOLARSHIPS
HOLY TRINITY LUTHERAN ACADEMY 4240 GETTYSBURG AVE N NEW HOPE, MN 55428	41-1925313		7,014.	0.	N/A	N/A	SCHOLARSHIPS
LAKE AREA DISCOVERY CENTER 3770 BELLAIRE AVE WHITE BEAR LAKE, MN 55110	41-1937239	501C3	46,404.	0.	N/A	N/A	SCHOLARSHIPS
BLOOM EARLY LEARNING 17805 COUNTY RD #6 PLYMOUTH, MN 55447	41-1939043	501C3	34,712.	0.	N/A	N/A	SCHOLARSHIPS
CROCUS HILL SCHOOL 60 N KENT ST SAINT PAUL, MN 55102	41-1947669		10,660.	0.	N/A	N/A	SCHOLARSHIPS
MILLENNIUM LEARNING CENTER INC DBA SMALL WORLD LEARNING CENTER - 13961 MAPLE KNOLL WAY - MAPLE GROVE, MN 55369	41-1961897		16,708.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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EXCELL ACADEMY FOR HIGHER LEARNING CHARTER SCHOOL - 6510 ZANE AVE N - BROOKLYN PARK, MN 55429	41-1968867	501C3	62,975.	0.	N/A	N/A	SCHOLARSHIPS
COLUMBIA HEIGHTS PUBLIC SCHOOL DIST - PRE-KINDERGARTEN PROGRAM - 1460 49TH AVE NE - COLUMBIA HEIGHTS, MN 55421-1939	41-6000080	501C3	26,977.	0.	N/A	N/A	SCHOLARSHIPS
BURNSVILLE PUBLIC SCHOOL DISTRICT - PRE-KINDERGARTEN PROGRAM - 200 WEST BURNSVILLE PARKWAY - BURNSVILLE, MN 55337	41-6000802	501C3	7,500.	0.	N/A	N/A	SCHOLARSHIPS
ST. ANTHONY-NEW BRIGHTON SCHOOLS - PRE-KINDERGARTEN PROGRAM - 3301 SILVER LAKE ROAD - ST. ANTHONY VILLAGE, MN 55418	41-6001400	501C3	45,000.	0.	N/A	N/A	SCHOLARSHIPS
MINNETONKA PUBLIC SCHOOL DISTRICT - PRE-KINDERGARTEN PROGRAM - 4584 VINE HALL ROAD - EXCELSIOR, MN 55331	41-6001402	501C3	6,126.	0.	N/A	N/A	SCHOLARSHIPS
ORONO PUBLIC SCHOOL DISTRICT - PRE-KINDERGARTEN PROGRAM - 5050 INDEPENDENCE STREET - MAPLE PLAIN, MN 55359	41-6001403	501C3	18,522.	0.	N/A	N/A	SCHOLARSHIPS
EDINA PUBLIC SCHOOL DISTRICT - PRE-KINDERGARTEN PROGRAM - 5701 NORMANDEALE ROAD - EDINA, MN 55424	41-6001406	501C3	75,480.	0.	N/A	N/A	SCHOLARSHIPS
EDEN PRAIRIE PUBLIC SCHOOL DISTRICT - PRE-KINDERGARTEN PROGRAM - 8040 MITCHELL ROAD - EDEN PRAIRIE, MN 55344	41-6001462	501C3	43,827.	0.	N/A	N/A	SCHOLARSHIPS
BLOOMINGTON PUBLIC SCHOOL DISTRICT - PRE-KINDERGARTEN PROGRAM - 3701 W 108TH ST - BLOOMINGTON, MN 55431	41-6001463	501C3	8,875.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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ST. LOUIS PARK PUBLIC SCHOOL DIST. - PRE-KINDERGARTEN PROGRAM - 6300 WALKER ST - ST LOUIS PARK, MN 55416	41-6001466	501C3	60,456.	0.	N/A	N/A	SCHOLARSHIPS
ROSEVILLE AREA SCHOOLS ISD 623 1251 W COUNTY RD B2 ROSEVILLE, MN 55113	41-6003439	501C3	29,693.	0.	N/A	N/A	SCHOLARSHIPS
TORAH TOTS 2800 JOPPA AVE S ST LOUIS PARK, MN 55416	41-6007486		223,208.	0.	N/A	N/A	SCHOLARSHIPS
WEST ST. PAUL-MENDOTA HTS.-EAGAN - PRE-KINDERGARTEN PROGRAM - 1970 CHRISTENSEN AVE - WEST ST PAUL, MN 55118	41-6007628	501C3	7,500.	0.	N/A	N/A	SCHOLARSHIPS
IND SCHOOL DISTRICT 621 350 W HWY 96 SHOREVIEW, MN 55126	41-6008084	501C3	33,268.	0.	N/A	N/A	SCHOLARSHIPS
SPRING LAKE PARK PUBLIC SCHOOLS - PRE-KINDERGARTEN PROGRAM - 10365 DAVENPORTE ST NE - MINNEAPOLIS, MN 55449	41-6008529	501C3	7,500.	0.	N/A	N/A	SCHOLARSHIPS
CENTENNIAL PUBLIC SCHOOL DISTRICT - PRE-KINDERGARTEN PROGRAM - 575 BIRCH STREET - LINO LAKES, MN 55014	41-6008811	501C3	5,494.	0.	N/A	N/A	SCHOLARSHIPS
DODGE NATURE PRESCHOOL 1715 CHARLTON STREET WEST ST PAUL, MN 55118	41-6081794	501C3	38,576.	0.	N/A	N/A	SCHOLARSHIPS
LA PETITE ACADEMY, INC. 32209 COLLECTIONS CENTER DR CHICAGO, IL 60693	43-1243221		84,140.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
BRIGHT START CHILD CARE CENTER INC 1197 UNIVERSITY AVE W STE 106 SAINT PAUL, MN 55104	45-2413379		5,548.	0.	N/A	N/A	SCHOLARSHIPS
YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES - 651 NICOLLET MALL, SUITE 500 - MINNEAPOLIS, MN 55402	45-2563299	501C3	171,971.	0.	N/A	N/A	SCHOLARSHIPS
SOUTHSIDE CHILD DEVELOPMENT CENTER LLC - 2501 TAYLOR ST NE - MINNEAPOLIS, MN 55418	45-3492464		15,000.	0.	N/A	N/A	SCHOLARSHIPS
ANGELS LEARNING CENTER 7624 BROOKLYN BLVD BROOKLYN PARK, MN 55443	45-3984850		69,909.	0.	N/A	N/A	SCHOLARSHIPS
EARLY ADVANTAGE DEVELOPMENTAL CHILD CARE CENTER LLC - 507 FRONTAGE RD NE - BYRON, MN 55920	45-4733218		16,661.	0.	N/A	N/A	SCHOLARSHIPS
COMMUNITY OF SAINTS REGIONAL CATHOLIC PRESCHOOL - 335 HURLEY ST E - WEST ST PAUL, MN 55118	45-4804818	501C3	14,265.	0.	N/A	N/A	SCHOLARSHIPS
MI FAMILIA CHILDCARE 2855 47TH ST E INVER GROVE HEIGHTS, MN 55076	45-5587465		33,944.	0.	N/A	N/A	SCHOLARSHIPS
PERFECT BALANCE CHILD CARE LLC 3616 12TH AVE S MINNEAPOLIS, MN 55407	46-1086606		21,112.	0.	N/A	N/A	SCHOLARSHIPS
LUCKY CHILD CARE CENTER LLC 525 LOWRY AVE NE MINNEAPOLIS, MN 55418	46-1224233		22,413.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
SEJONG ACADEMY OF MINNESOTA 1330 BLAIR AVE N SAINT PAUL, MN 55104	46-1710874	501C3	5,101.	0.	N/A	N/A	SCHOLARSHIPS
CEDAR RIVERSIDE CHILD CARE CENTER LLC - 404 CEDAR AVE S - MINNEAPOLIS, MN 55454	46-2350408		174,894.	0.	N/A	N/A	SCHOLARSHIPS
ARTA CHILD CARE CENTER 3401 CHICAGO AVE S MINNEAPOLIS, MN 55407	46-2842530		40,491.	0.	N/A	N/A	SCHOLARSHIPS
OLU'S BEGINNINGS 1315 12TH AVE N MINNEAPOLIS, MN 55411	46-3730655		18,743.	0.	N/A	N/A	SCHOLARSHIPS
MINNESOTA CHILD CARE CENTER 312 W LAKE ST STE 2935 MINNEAPOLIS, MN 55408	46-5432100		27,507.	0.	N/A	N/A	SCHOLARSHIPS
MONTESSORI AMERICAN INDIAN CHILDCARE CENTER - 1909 IVY AVE E - SAINT PAUL, MN 55119	47-0972540		27,672.	0.	N/A	N/A	SCHOLARSHIPS
SMALL WORLD LEARNING CENTER 8400 CITY CENTER DR WOODBURY, MN 55125	47-1843383		5,368.	0.	N/A	N/A	SCHOLARSHIPS
LITTLE STEPS CHILDCARE CENTER 906 DALE ST N SAINT PAUL, MN 55103	47-1890116		6,155.	0.	N/A	N/A	SCHOLARSHIPS
KID'S HAVEN CHILD CARE AND PRESCHOOL - 302 12TH AVE S - BUFFALO, MN 55313	47-2887703		5,516.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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ORIGINAL CHILD CARE CENTER INC (THE) - 2733 PARK AVE S - MINNEAPOLIS, MN 55407	47-4176604		13,884.	0.	N/A	N/A	SCHOLARSHIPS
CITY CHILD CARE CENTER LLC 2628 NICOLLET AVE S MINNEAPOLIS, MN 55408	47-4400216		26,400.	0.	N/A	N/A	SCHOLARSHIPS
STAR CHILD DEVELOPMENT CENTER LLC 1915 W BROADWAY AVE MINNEAPOLIS, MN 55411	47-4499094		56,778.	0.	N/A	N/A	SCHOLARSHIPS
NEXT STEPS LEARNING CENTER 1430 PARK CT CHANHASSEN, MN 55317	47-4632146		36,820.	0.	N/A	N/A	SCHOLARSHIPS
DIAMOND DAYCARE INC 460 LEXINGTON PKWY N SAINT PAUL, MN 55104	47-5483891		7,500.	0.	N/A	N/A	SCHOLARSHIPS
MINNESOTA BEST CHILDCARE CENTER 3018 17TH AVE S MINNEAPOLIS, MN 55407	60-4940393		27,616.	0.	N/A	N/A	SCHOLARSHIPS
PUMPKIN PATCH DAYCARE AND LEARNING CENTER, INC. - 14001 BURNHAVEN DR - BURNSVILLE, MN 55337	61-1435063		22,295.	0.	N/A	N/A	SCHOLARSHIPS
KINDERCARE LEARNING CENTERS LLC 650 NE HOLLADAY ST., SUITE 1400 PORTLAND, OR 97232	63-0941966		1,222,613.	0.	N/A	N/A	SCHOLARSHIPS
LEARN AND GROW CHILD CARE CENTER SOUTH, INC. - 1201 89TH AVE NE, SUITE 120 - BLAINE, MN 55434	68-0585891	501C3	17,004.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

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WAY TO GROW PRESCHOOL 3333 4TH ST N MINNEAPOLIS, MN 55412	71-0956749	501C3	38,372.	0.	N/A	N/A	SCHOLARSHIPS
TENDER CHILD CARE LLC (W-9) 1260 W. BROADWAY SAINT PAUL, MN 55107	80-0753140		19,644.	0.	N/A	N/A	SCHOLARSHIPS
JOYCE PRESCHOOL 3400 PARK AVE S MINNEAPOLIS, MN 55407	81-0594016	501C3	26,433.	0.	N/A	N/A	SCHOLARSHIPS
CEDAR CHILD CARE CENTER INC 3011 CEDAR AVE S MINNEAPOLIS, MN 55407	81-1252559		17,296.	0.	N/A	N/A	SCHOLARSHIPS
KIDDIEGARTEN SCHOOL OF MAPLE GROVE 9495 GARLAND LANE N MAPLE GROVE, MN 55311	81-2227160		15,213.	0.	N/A	N/A	SCHOLARSHIPS
TENDERCARE LEARNING CENTER LLC 8040 OLD CEDAR AVE #3 BLOOMINGTON, MN 55425	81-2330797		58,313.	0.	N/A	N/A	SCHOLARSHIPS
CAMDEN KIDS INC 4656 COLFAX AVE N MINNEAPOLIS, MN 55412	81-2858432		16,716.	0.	N/A	N/A	SCHOLARSHIPS
IT STARTS WITH LUV CHILD CARE LLC 2604 42ND AVE N MINNEAPOLIS, MN 55412	81-4038921		10,000.	0.	N/A	N/A	SCHOLARSHIPS
ES SBS ST ANTHONY LLC 4355 US-169 N PLYMOUTH, MN 55442	81-4232297		13,575.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

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ES SBS CORCORAN LLC 23610 CO RD 10 CORCORAN, MN 55357	81-4259044		7,500.	0.	N/A	N/A	SCHOLARSHIPS
HAZEL PARK LEARNING CENTER 1831 E MINNEHAHA AVE SAINT PAUL, MN 55119	81-4816371		7,500.	0.	N/A	N/A	SCHOLARSHIPS
URBAN LEARNING CENTER INC 2505 5TH AVE S MINNEAPOLIS, MN 55404	81-5188940		14,609.	0.	N/A	N/A	SCHOLARSHIPS
LITTLE UTA CHILD CARE INC 3701 JACKSON ST NE COLUMBIA HEIGHTS, MN 55421	81-5413374		7,500.	0.	N/A	N/A	SCHOLARSHIPS
FUTURE SCHOLARS CHILDCARE CENTER 2652 CHICAGO AVE S MINNEAPOLIS, MN 55407	82-1735342		14,301.	0.	N/A	N/A	SCHOLARSHIPS
NEW CREATIONS CHILDCARE 16547 MARKETPLACE DR BIG LAKE, MN 55309	82-1931422		50,439.	0.	N/A	N/A	SCHOLARSHIPS
MINNESOTA WILDFLOWER MONTESSORI SCHOOL - 1010 W LAKE ST. STE. 100 - MINNEAPOLIS, MN 55408	82-3187122		56,471.	0.	N/A	N/A	SCHOLARSHIPS
METRO LEARNING CENTER INC. 2833 13TH AVE S STE 200 MINNEAPOLIS, MN 55407	82-3334358		33,706.	0.	N/A	N/A	SCHOLARSHIPS
PRIMSPLS ENTERPRISES LLC 6500 RICHFIELD PKWY RICHFIELD, MN 55423	82-4743353		7,842.	0.	N/A	N/A	SCHOLARSHIPS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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SUCCESS CHILD CARE INC. 946 UNIVERSITY AVE W ST PAUL, MN 55104	82-5374232		13,696.	0.	N/A	N/A	SCHOLARSHIPS
LFD CORPORATION 6226 BASS LAKE RD CRYSTAL, MN 55429	83-4456311		5,530.	0.	N/A	N/A	SCHOLARSHIPS
ST. PASCAL REGIONAL CATHOLIC SCHOOL - 1757 CONWAY ST - SAINT PAUL, MN 55106	84-1943812		5,472.	0.	N/A	N/A	SCHOLARSHIPS
WOODBURY LUTHERAN PRESCHOOL 7380 AFTON RD WOODBURY, MN 55125	91-0811792	501C3	5,991.	0.	N/A	N/A	SCHOLARSHIPS

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EARLY LEARNING SUPPORT	641	1,983,911.	0.	N/A	N/A

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

PART I, LINE 2:

GRANTS AND SCHOLARSHIP COORDINATORS EXECUTE ESTABLISHED PROGRAM GUIDELINES

ACCORDING TO PROGRAM SPECIFICATIONS.

GRANTS: A PIER COMMITTEE REVIEWS FOR APPROVAL ALL GRANT PROPOSALS. FUNDING

IS ALLOCATED BASED ON PROGRAM BALANCE AND COMMITTEE RECOMMENDATIONS. FUNDS

ARE EXPENDED UPON RECEIPT OF GRANTEE INVOICES DOCUMENTING PURCHASES AND

FULFILLMENT OF GRANT OBLIGATIONS. GRANTEES SUBMIT FINAL GRANT REPORTS.

Part IV Supplemental Information

SCHOLARSHIPS: THROUGH A REVIEW PROCESS, ELIGIBILITY IS DETERMINED AND

SCHOLARSHIPS ARE AWARDED, PROVIDING QUALITY EARLY LEARNING OPPORTUNITIES

FOR CHILDREN ATTENDING PROGRAMS INVOLVED IN PARENT AWARE. FISCAL MONITORING

OCCURS INTERNALLY AND WITH GOVERNMENT PARTNERS.

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

THINK SMALL

Employer identification number

41-1260581

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) BARBARA YATES PRESIDENT AND CEO	(i)	192,009.	0.	0.	7,969.	8,230.	208,208.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) E. MARK CROSS CHIEF OPERATING OFFICER	(i)	165,105.	3,275.	0.	6,703.	1,038.	176,121.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

THINK SMALL

Employer identification number

41-1260581

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

SCHOLARSHIPS AND OTHER FINANCIAL SUPPORTS

THINK SMALL SERVES PROVIDERS AND FAMILIES WITH TARGETED FINANCIAL

SUPPORTS. THINK SMALL ADMINISTERS OVER 4,700 ELIGIBILITY-BASED

SCHOLARSHIPS FOR FAMILIES TO ENROLL CHILDREN IN QUALITY CHILDCARE

PROGRAMS IN ORDER TO REDUCE OPPORTUNITY GAPS.

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

THINK SMALL'S MULTILINGUAL OUTREACH STAFF CONNECTS WITH HISTORICALLY

UNDERSERVED COMMUNITIES, INCLUDING THOSE IN LOW-INCOME NEIGHBORHOODS,

ENGLISH LANGUAGE LEARNERS (ELL), COMMUNITIES OF COLOR, IMMIGRANT AND

REFUGEE FAMILIES, SO THEY CAN FULLY ENGAGE IN MINNESOTA'S EARLY

CHILDHOOD CARE AND EDUCATION SYSTEM. STAFF ASSIST NEARLY 1,000 NEW

IMMIGRANT AND OTHER FAMILIES AND PROVIDERS NAVIGATING COMPLEX

GOVERNMENT SYSTEMS, CONNECTING THEM TO RESOURCES AND SERVICES AVAILABLE

AT THINK SMALL AND OTHER ORGANIZATIONS. STAFF PROVIDE LANGUAGE

TRANSLATION AND INTERPRETATION FOR PROVIDERS AND FAMILIES.

PUBLISHING

REDLEAF PRESS IS OUR AWARD-WINNING, INTERNATIONAL PUBLISHER OF

EXCEPTIONAL EARLY LEARNING CURRICULUM, PROFESSIONAL DEVELOPMENT

MATERIALS, AND BUSINESS RESOURCES. REDLEAF PUBLISHES MORE THAN A DOZEN

NEW TITLES EVERY YEAR AND HAS APPROXIMATELY 400 TITLES IN PRINT.

REDLEAF PRESS HAS 56 BOOKS TRANSLATED INTO 12 DIFFERENCE LANGUAGES.

OVER 200,000 PRODUCTS ARE DISTRIBUTED EACH YEAR TO CUSTOMERS BOTH IN

THE U.S. AND ABROAD.

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

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

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

A BRANCH OF THE ST. PAUL PUBLIC LIBRARY THE DEBRA S. FISH EARLY

CHILDHOOD LIBRARY IS AVAILABLE STATEWIDE. NOW NUMBERING OVER 6,500

ITEMS, THE LIBRARY'S COLLECTION IS A PART OF MINNESOTA'S PUBLIC

INTERLIBRARY LOAN SYSTEM AND MATERIALS CAN BE DELIVERED TO ALL LOCAL

LIBRARIES.

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

PROMISING INITIATIVES TO SCALE, THINK SMALL HAS HELPED IMPROVE ACCESS

TO QUALITY EARLY LEARNING OPPORTUNITIES AND HAS HELPED BUILD

ACCOUNTABILITY IN THE SYSTEM. THINK SMALL CONTINUALLY FOCUSES ON OUR

EFFORTS ENSURING THAT FAMILIES HAVE A VARIETY OF HIGH QUALITY EARLY

LEARNING OPPORTUNITIES THAT WILL PUT THEIR CHILD ON THE PATH TO SCHOOL

AND LIFE SUCCESS.

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 11B:

UPON COMPLETION AND REVIEW BY MANAGEMENT, THE DRAFT FORM 990 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. ONCE

COMPLETE, THE APPROVED DOCUMENT IS FILED WITH THE IRS.

Name of the organization THINK SMALL	Employer identification number 41-1260581
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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 IS SET BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. AN EXTERNAL FIRM SPECIALIZING IN COMPENSATION SERVICES IS RETAINED FOR THE PURPOSES OF GATHERING AND PROVIDING INDEPENDENT MARKET DATA AND RECOMMENDING SALARY RANGE. THE PROCESS IS DOCUMENTED IN THE EXECUTIVE COMMITTEE MEETING MINUTES. SALARY DETERMINATION IS SENT IN WRITING FROM THE BOARD CHAIR TO THE PRESIDENT & CEO AND PROVIDED TO COO/HR DIRECTOR.

IN JUNE 2018, THE ORGANIZATION CONTRACTED WITH AN EXTERNAL FIRM TO CONDUCT MARKET REVIEW OF CEO & 15 SENIOR MANAGEMENT POSITIONS. THE PROCESS UNDERWAY INCLUDES: PROJECT PLANNING AND CONFIRMATION OF MARKET PRICING PHILOSOPHY,

Name of the organization THINK SMALL	Employer identification number 41-1260581
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JOB ANALYSIS AND EXTERNAL MARKET PRICING, COST IMPACT ANALYSIS, AND AN EXECUTIVE COMMITTEE TUTORIAL. THE PROCESS WILL BE REVIEWED WITH THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS ONCE COMPLETED AND DOCUMENTED IN COMMITTEE MINUTES. RANGES FOR KEY POSITIONS MAY ALSO BE UPDATED IF A VACANCY OCCURS, EITHER BY THE HR DIRECTOR OR AN OUTSIDE FIRM. BOTH UTILIZE MARKET DATA AND COMPENSATION SURVEYS TO INFORM THE RESULTS.

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

THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE.