

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

**A** For the 2020 calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

<b>B</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	<b>C</b> Name of organization <p><b>Think Small</b></p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p><b>10 Yorkton Court</b></p> City or town, state or province, country, and ZIP or foreign postal code <p><b>Saint Paul, MN 55117</b></p> <b>F</b> Name and address of principal officer: <b>Barbara Yates</b> same as C above	<b>D</b> Employer identification number <p><b>41-1260581</b></p> <b>E</b> Telephone number <p><b>(651) 641-0305</b></p> <b>G</b> Gross receipts \$ <b>28,150,840.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
<b>I</b> 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		
<b>J</b> Website: ▶ <b>www.thinksmall.org</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
<b>L</b> Year of formation: <b>1975</b>		<b>M</b> State of legal domicile: <b>MN</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>To advance quality care and education of children in their crucial early years.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b>	<b>18</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b>	<b>18</b>
	<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a) .....	<b>5</b>	<b>117</b>
	<b>6</b> Total number of volunteers (estimate if necessary) .....	<b>6</b>	<b>18</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b>	<b>0.</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11 .....	<b>7b</b>	<b>0.</b>
<b>Revenue</b>		<b>Prior Year</b>	<b>Current Year</b>
	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	27,014,489.	24,154,380.
	<b>9</b> Program service revenue (Part VIII, line 2g) .....	276,810.	55,480.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	10,316.	106,705.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	2,090,847.	2,316,399.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	29,392,462.	26,632,964.
<b>Expenses</b>		<b>Prior Year</b>	<b>Current Year</b>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	21,257,973.	17,178,826.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	5,928,267.	6,343,792.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....	0.	0.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>472,476.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	2,901,528.	2,993,128.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	30,087,768.	26,515,746.
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....	-695,306.	117,218.
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16) .....	8,651,582.	8,914,729.
	<b>21</b> Total liabilities (Part X, line 26) .....	5,455,769.	4,482,485.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	3,195,813.	4,432,244.

**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.

<b>Sign Here</b>	Signature of officer <p><b>Barbara Yates, President and CEO</b></p> Type or print name and title	Date _____
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <p><b>Steven D. Anseth, CPA</b></p> Preparer's signature <p><b>Steven D. Anseth, CP</b></p> Date <p><b>11/30/21</b></p> Check if self-employed <input type="checkbox"/> PTIN <p><b>P00552219</b></p> Firm's name ▶ <b>Abdo, Eick &amp; Meyers, LLP</b> Firm's EIN ▶ <b>41-1397419</b> Firm's address ▶ <b>5201 Eden Avenue, Suite 250</b> <b>Edina, MN 55436</b> Phone no. <b>952-835-9090</b>	

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? [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [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 \$ 17,634,765. including grants of \$ 15,330,038.) (Revenue \$ 0.)

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. Think Small parent-powered texting delivers evidence-based texting messages to parents and caregivers, across MN, for children birth to 5 years old. These short text messages encourage parents to do fun and engaging activities with their children to increase their literacy and numeracy development as well as tips on how to be healthy. Over 10,000 families are currently enrolled.

Scholarships and other financial supports: Think Small serves providers and families with targeted financial supports. Think Small administers

4b (Code: ) (Expenses \$ 7,046,578. including grants of \$ 1,848,788.) (Revenue \$ 2,165,087.)

Prepare providers: Professional development, consultation, and coaching: Think Small provides metro-wide professional development opportunities focused on the essential elements of high-quality care. Opportunities include classes and workshops provided in English, Spanish, Hmong, Somali, Oromo, Amharic, and Karen; individual and site-based consultation and coaching support; business support to help maintain a successful childcare business; and career guidance for certification and licensing. Over 11,000 child care providers take part in trainings and coaching every year.

Community outreach and access: Think Small's multilingual outreach staff connects with historically underserved communities, including

4c (Code: ) (Expenses \$ 199,762. including grants of \$ ) (Revenue \$ )

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, childcare assistance and most recently the economic development of the child care sector. By leading from the development of policy concepts through the piloting stages and by helping take promising initiatives to scale, Think Small has helped improve access to quality early learning opportunities and has helped

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

4e Total program service expenses 24,881,105.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	X	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .....	X	
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .....	X	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....		X
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....		X
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	X	
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> .....		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note:** All Form 990 filers are required to complete Schedule O

**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

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	

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

		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return ..... <b>2a</b> 117		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? ..... <b>2b</b> X	X	
<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) .....			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year? ..... <b>3a</b>		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O ..... <b>3b</b>		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? ..... <b>4a</b>		X
<b>b</b>	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? ..... <b>5a</b>		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? ..... <b>5b</b>		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? ..... <b>5c</b>		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? ..... <b>6a</b>		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .....		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? ..... <b>7a</b>		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? .....		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? .....		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year ..... <b>7d</b>		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .....		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .....		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ... <b>7g</b>		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? <b>7h</b>		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? ..... <b>8</b>		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966? .....		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? .....		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 ..... <b>10a</b>		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ..... <b>10b</b>		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders ..... <b>11a</b>		
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) ..... <b>11b</b>		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? ..... <b>12a</b>		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year ..... <b>12b</b>		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? ..... <b>13a</b>		
<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans ..... <b>13b</b>		
<b>c</b>	Enter the amount of reserves on hand ..... <b>13c</b>		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year? ..... <b>14a</b>		X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O ..... <b>14b</b>		
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? ..... <b>15</b>		X
If "Yes," see instructions and file Form 4720, Schedule N.			
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? ..... <b>16</b>		X
If "Yes," complete Form 4720, Schedule O.			

**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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	<b>1a</b> 18		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
	<b>1b</b> 18		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	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
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>10b</b>			
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>12c</b>		X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>b</b>	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	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
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
<b>16b</b>			

**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.  
 Own website     Another's website     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 **E Mark Cross - (651) 641-0305**  
**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			198,912.	0.	41,723.	
(2) Mark Cross Chief Operating Officer	40.00			X			170,093.	0.	6,740.	
(3) Diane Haulcy SVP of Family Engagement	40.00					X	108,646.	0.	27,698.	
(4) Cisa Keller SVP EC Quality Development	40.00					X	114,581.	0.	16,571.	
(5) Jonathan May VP of Innovations & Development	40.00					X	100,152.	0.	12,514.	
(6) Robbin Johnson Chair	1.00	X		X			0.	0.	0.	
(7) Tanya Skogerboe Vice Chair	1.00	X		X			0.	0.	0.	
(8) Sarah Wade Treasurer	1.00	X		X			0.	0.	0.	
(9) Margeaux King Secretary	1.00	X		X			0.	0.	0.	
(10) Andre D. Dukes Director	1.00	X					0.	0.	0.	
(11) Andrea Singh Director	1.00	X					0.	0.	0.	
(12) Arthur Rolnick Director	1.00	X					0.	0.	0.	
(13) Cory Padesky Director	1.00	X					0.	0.	0.	
(14) Fred Senn Director	1.00	X					0.	0.	0.	
(15) Jaylon Rosenblum Director	1.00	X					0.	0.	0.	
(16) Jim Sparks Director	1.00	X					0.	0.	0.	
(17) Karen Hilding 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) Marilyn Burnett Director	1.00	X					0.	0.	0.	
(19) Megan Gunnar Director	1.00	X					0.	0.	0.	
(20) Tracy Nordstrom Director	1.00	X					0.	0.	0.	
(21) Trent Tucker Director	1.00	X					0.	0.	0.	
(22) Weston Merrick Director	1.00	X					0.	0.	0.	
(23) Yolanda J. Majors Director	1.00	X					0.	0.	0.	
<b>1b Subtotal</b> .....							692,384.	0.	105,246.	
<b>c Total from continuation sheets to Part VII, Section A</b> .....							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b> .....							692,384.	0.	105,246.	

**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 **5**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		X
<b>4</b> 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	
<b>5</b> 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	310,202.
Versa Press, Inc. 1465 Spring Bay Road, East Peoria, IL 61611	Printing & Binding Books	233,443.
The Dingley Press, Inc. CL 300028, Lewiston, ME 04243-9596	Redleaf Press Mailings	159,749.

**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 **3**



**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	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	22,301,436.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	1,852,944.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 136,965.				
	<b>h Total.</b> Add lines 1a-1f .....			24,154,380.			
<b>Program Service Revenue</b>	<b>2 a</b> Professional Development .....	<b>Business Code</b>					
		624410	55,480.	55,480.			
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....			55,480.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		21,161.			21,161.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....		109,417.			109,417.	
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses ...	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities	615,043.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	529,499.				
	<b>c</b> Gain or (loss) .....	<b>7c</b>	85,544.				
<b>d</b> Net gain or (loss) .....			85,544.		85,544.		
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
<b>b</b> Less: direct expenses .....	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>		3,097,984.				
<b>b</b> Less: cost of goods sold .....	<b>10b</b>	988,377.					
<b>c</b> Net income or (loss) from sales of inventory .....			2,109,607.	2,109,607.			
<b>Miscellaneous Revenue</b>	<b>11 a</b> Miscellaneous Revenue .....	<b>Business Code</b>					
		900099	97,375.			97,375.	
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
<b>e Total.</b> Add lines 11a-11d .....			97,375.				
<b>12 Total revenue.</b> See instructions .....			26,632,964.	2,165,087.	0.	313,497.	

**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	15,334,433.	15,334,433.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	1,844,393.	1,844,393.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	405,836.	146,101.	202,918.	56,817.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	4,962,462.	4,403,213.	356,546.	202,703.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	169,929.	147,338.	16,618.	5,973.
<b>9</b> Other employee benefits	439,595.	396,480.	30,832.	12,283.
<b>10</b> Payroll taxes	365,970.	315,847.	33,533.	16,590.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	9,533.		9,533.	
<b>c</b> Accounting	27,557.		27,557.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	5,072.		5,072.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	418,201.	171,217.	236,451.	10,533.
<b>12</b> Advertising and promotion	487,336.	480,487.	5,913.	936.
<b>13</b> Office expenses	597,347.	575,155.	16,185.	6,007.
<b>14</b> Information technology	190,453.	184,739.		5,714.
<b>15</b> Royalties				
<b>16</b> Occupancy	331,865.	256,440.	72,492.	2,933.
<b>17</b> Travel	11,724.	563.	11,070.	91.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	96,867.	88,628.	8,239.	
<b>20</b> Interest	9,830.	6,578.	3,053.	199.
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	484,166.	431,941.	46,193.	6,032.
<b>23</b> Insurance	67,957.	29,032.	38,014.	911.
<b>24</b> 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.)				
<b>a</b> <b>Supplies</b>	136,965.			136,965.
<b>b</b> <b>Credit Card/Bank Fees</b>	97,315.	54,074.	40,116.	3,125.
<b>c</b> <b>Miscellaneous Expense</b>	20,940.	14,446.	1,830.	4,664.
<b>d</b> _____				
<b>e</b> All other expenses _____				
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	26,515,746.	24,881,105.	1,162,165.	472,476.
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	351,158.	<b>1</b>	2,103,703.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....	322,100.	<b>3</b>	10,261.
	<b>4</b> Accounts receivable, net .....	3,587,906.	<b>4</b>	2,248,959.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	476,142.	<b>8</b>	503,934.
	<b>9</b> Prepaid expenses and deferred charges .....	154,587.	<b>9</b>	143,134.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 4,345,907.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 3,348,901.	1,063,346.	<b>10c</b> 997,006.
	<b>11</b> Investments - publicly traded securities .....	904,139.	<b>11</b>	1,102,670.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	704,920.	<b>12</b>	794,096.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....	3,707.	<b>14</b>	1,366.
	<b>15</b> Other assets. See Part IV, line 11 .....	1,083,577.	<b>15</b>	1,009,600.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	8,651,582.	<b>16</b>	8,914,729.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	3,340,026.	<b>17</b>	3,384,490.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	1,240,250.	<b>19</b>	648,558.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	426,093.	<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	449,400.	<b>24</b>	449,437.
	<b>25</b> 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 .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	5,455,769.	<b>26</b>	4,482,485.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	2,694,347.	<b>27</b>	4,045,713.
	<b>28</b> Net assets with donor restrictions .....	501,466.	<b>28</b>	386,531.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	3,195,813.	<b>32</b>	4,432,244.
<b>33</b> Total liabilities and net assets/fund balances .....	8,651,582.	<b>33</b>	8,914,729.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	26,632,964.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	26,515,746.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	117,218.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	3,195,813.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	199,213.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	920,000.
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	4,432,244.

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>b</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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>c</b>	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.	X	
<b>3a</b>	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? _____	X	
<b>b</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 _____	X	

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization **Think Small** Employer identification number **41-1260581**

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 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		
<b>Total</b>						

**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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	31341634.	30886658.	30180011.	27014489.	24154380.	143577172
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	31341634.	30886658.	30180011.	27014489.	24154380.	143577172
<b>5</b> 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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						143577172

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 .....	31341634.	30886658.	30180011.	27014489.	24154380.	143577172
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	31,340.	53,791.	35,121.	70,574.	130,578.	321,404.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	53,609.	27,919.	27,916.	175,756.	97,375.	382,575.
<b>11 Total support.</b> Add lines 7 through 10						144281151
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	

**13 First 5 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**

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)).....	<b>14</b>	99.51 %
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....	<b>15</b>	99.63 %

**16a 33 1/3% support test - 2020.** 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

**b 33 1/3% support test - 2019.** 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

**17a 10% -facts-and-circumstances test - 2020.** 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

**b 10% -facts-and-circumstances test - 2019.** 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

**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

**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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 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**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2019 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2020.** 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 - 2019.** 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 box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> 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>		
<b>2</b> 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>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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>		
<b>c</b> 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>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</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>		
<b>c</b> 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>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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>		
<b>7</b> 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>		
<b>8</b> 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>		
<b>9a</b> 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>b</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>		
<b>c</b> 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>		
<b>10a</b> 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 line 10b below.</i>		
<b>b</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
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described in line 11a above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>1</b>		
<b>2</b> 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? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.			
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> 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.		Yes	No
<b>2a</b>			
<b>b</b> Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>2b</b>			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI</b> .			
<b>3a</b>			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.			
<b>3b</b>			

**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.

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> 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).		

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

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2020 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2020</b>	<b>(iii) Distributable Amount for 2020</b>
<b>1</b> Distributable amount for 2020 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020			
<b>a</b> From 2015			
<b>b</b> From 2016			
<b>c</b> From 2017			
<b>d</b> From 2018			
<b>e</b> From 2019			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2020 distributable amount			
<b>i</b> Carryover from 2015 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2020 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2016			
<b>b</b> Excess from 2017			
<b>c</b> Excess from 2018			
<b>d</b> Excess from 2019			
<b>e</b> Excess from 2020			



**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

**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 <b>Think Small</b>	Employer identification number <b>41-1260581</b>
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**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	Hennepin County 300 S. 6th Street Minneapolis, MN 55487	\$ 2,285,588.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Minnesota Department of Education 1500 Highway 36 West Roseville, MN 55113	\$ 14,827,177.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	WEM 2000 Foundation P.O. Box 5628 Minneapolis, MN 55440	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	MN Department of Human Services 444 Lafayette Rd St. Paul, MN 55155	\$ 4,423,462.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	Ramsey County 160 East Kellogg Blvd., Suite 9300 St. Paul, MN 55101	\$ 693,112.	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.)

Name of organization  <b>Think Small</b>	Employer identification number  <b>41-1260581</b>
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**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 <b>Think Small</b>	Employer identification number <b>41-1260581</b>
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**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
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
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

**2020**

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](http://www.irs.gov/Form990) for instructions and the latest information.**

**Open to Public Inspection**

**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 <b>Think Small</b>	Employer identification number <b>41-1260581</b>
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**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 ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**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 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 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-.

**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.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1 a</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) .....	84,020.													
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) .....	84,020.													
<b>d</b>	Other exempt purpose expenditures .....	26,431,726.													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) .....	26,515,746.													
<b>f</b>	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.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) .....	250,000.													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- .....	0.													
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- .....	0.													
<b>j</b>	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.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>						
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total	
<b>2 a</b>	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b>	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
<b>c</b>	Total lobbying expenditures	95,014.	91,999.	151,417.	84,020.	422,450.
<b>d</b>	Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>e</b>	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
<b>f</b>	Grassroots lobbying expenditures	92,528.	88,410.	113,563.	84,020.	378,521.

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> 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
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	<b>3</b>	

**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."**

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> ).		
<b>a</b> Current year .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	
<b>4</b> 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? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (See instructions) .....	<b>5</b>	

**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.

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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

2020

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and questions about donor property and grant fund usage.

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

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes for public use, natural habitat, open space, historic area, historic structure). 2. Conservation contribution details (2a-2d table). 3-8. Monitoring and enforcement questions (checkboxes for Yes/No). 9. Reporting requirements.

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.

Form with 2 main sections: 1a. Reporting requirements for art/historical treasures held for public service. 1b. Reporting requirements for art/historical treasures held for public service with amounts. 2. Reporting requirements for art/historical treasures held for financial gain with amounts.

**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    |
|--|-----------|
| <b>c</b> Beginning balance             | <b>1c</b> |
| <b>d</b> Additions during the year     | <b>1d</b> |
| <b>e</b> Distributions during the year | <b>1e</b> |
| <b>f</b> Ending balance                | <b>1f</b> |
- 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
<b>1a</b> Beginning of year balance					
<b>b</b> Contributions					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> 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 |
|---|---------------|----|
| <b>(i)</b> Unrelated organizations  | <b>3a(i)</b>  |    |
| <b>(ii)</b> Related organizations   | <b>3a(ii)</b> |    |
| <b>b</b> If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | <b>3b</b>     |    |
- 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
<b>1a</b> Land		205,000.		205,000.
<b>b</b> Buildings		2,750,902.	2,378,944.	371,958.
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		1,390,005.	969,957.	420,048.
<b>e</b> Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				997,006.

**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		
(B) Fund, LTD.	623,179.	End-of-Year Market Value
(C) Whitebox Credit Fund,		
(D) LTD.	170,917.	End-of-Year Market Value
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	<b>794,096.</b>	

**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)		
<b>Total.</b> (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	1,003,481.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	<b>1,009,600.</b>

**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)	
<b>Total.</b> (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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	26,832,177.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	<b>a</b> Net unrealized gains (losses) on investments	<b>2a</b>	199,213.
	<b>b</b> Donated services and use of facilities	<b>2b</b>	
	<b>c</b> Recoveries of prior year grants	<b>2c</b>	
	<b>d</b> Other (Describe in Part XIII.)	<b>2d</b>	
	<b>e</b> Add lines 2a through 2d	<b>2e</b>	199,213.
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	26,632,964.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	<b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
	<b>b</b> Other (Describe in Part XIII.)	<b>4b</b>	
	<b>c</b> Add lines 4a and 4b	<b>4c</b>	0.
<b>5</b>	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<b>5</b>	26,632,964.

**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.

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	26,515,746.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	<b>a</b> Donated services and use of facilities	<b>2a</b>	
	<b>b</b> Prior year adjustments	<b>2b</b>	
	<b>c</b> Other losses	<b>2c</b>	
	<b>d</b> Other (Describe in Part XIII.)	<b>2d</b>	
	<b>e</b> Add lines 2a through 2d	<b>2e</b>	0.
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	26,515,746.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	<b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
	<b>b</b> Other (Describe in Part XIII.)	<b>4b</b>	
	<b>c</b> Add lines 4a and 4b	<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<b>5</b>	26,515,746.

**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.

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**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

Think Small

Employer identification number

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	794,096.
<b>3 a</b> Subtotal .....	0	0			794,096.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			794,096.

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

Schedule F (Form 990) 2020



**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

**2** Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ..... ▶ \_\_\_\_\_

**3** Enter total number of other organizations or entities ..... ▶ \_\_\_\_\_

**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.

<b>(a)</b> Type of grant or assistance	<b>(b)</b> Region	<b>(c)</b> Number of recipients	<b>(d)</b> Amount of cash grant	<b>(e)</b> Manner of cash disbursement	<b>(f)</b> Amount of noncash assistance	<b>(g)</b> Description of noncash assistance	<b>(h)</b> 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

**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 providing 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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

**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.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
DODGE NATURE PRESCHOOL & THOMAS IRVINE NATURE CENTER - 1715 CHARLTON ST - WEST ST PAUL, MN 55118	41-6081794	501(c)(3)	15,265.	0.			Scholarship
Primsmppls Enterprises LLC 6500 Richfield Parkway Richfield, MN 55423	82-4743353		8,100.	0.			Scholarship
HOLY TRINITY LUTHERAN CHURCH 4240 GETTYSBURG AVE N NEW HOPE, MN 55428	41-1925313	501(c)(3)	15,696.	0.			Scholarship
ROXANNE WILLIAMS 1558 WESTMINSTER ST ST PAUL, MN 55130	42-1643762		10,605.	0.			Scholarship
ESPECIALLY FOR CHILDREN INC 5223 W 73RD ST EDINA, MN 55439	41-1318998		146,416.	0.			Scholarship
CATHOLIC CHARITIES OF THE ARCHDIOCESE OF ST PAUL AND MINNEAPOLIS - 1000 PLYMOUTH AVE N - MINNEAPOLIS, MN 55411	41-1302487	501(c)(3)	230,856.	0.			Scholarship

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **81.**

**3** Enter total number of other organizations listed in the line 1 table **135.**

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

Schedule I (Form 990) 2020

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
NOAHS ARK CHILD DEVELOPMENT CENTERS INC - 10420 Normandale Boulevard - Minneapolis, MN 55437	41-1494089		23,305.	0.			Scholarship
FAMILY CHILD DEVELOPMENT CENTER 100 Nathan Ln N PLYMOUTH, MN 55441	41-1690793	501(c)(3)	20,900.	0.			Scholarship
JOYCE PRESCHOOL 3400 PARK AVE MINNEAPOLIS, MN 55407	81-0594016	501(c)(3)	29,698.	0.			Scholarship
SCHOOL READINESS LEARNING ACADEMY 1221 7th Avenue North Minneapolis, MN 55411	26-3245237		131,089.	0.			Scholarship
COMMUNITY CHILD CARE CENTER 1250 Fifield AVE St. Paul, MN 55108	23-7392142	501(c)(3)	11,258.	0.			Scholarship
US Toy Co Inc 13201 Arrington Road Grandview, MO 64030	44-0577574		50,000.	0.			Scholarship
IT STARTS WITH LUV CHILDCARE LLC 2604 42ND AVE N MINNEAPOLIS, MN 55412	81-4038921		5,264.	0.			Scholarship
ISD 16 - SPRING LAKE PARK COMMUNITY ED 1415 81ST AVE NE SPRING LAKE PARK, MN 55432	41-6008529	501(c)(3)	8,819.	0.			Scholarship
KAPLAN EARLY LEARNING COMPANY PO BOX 890575 CHARLOTTE, NC 28289-0575	56-0935286		197,360.	0.			Scholarship

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
MEMORIES AND MILESTONES ACADEMY 1501 1ST ST NE NEW PRAGUE, MN 56071	90-1252650		5,192.	0.			Scholarship
AGAPE CHILD DEVELOPMENT CENTER 2304 EMERSON AVE N MINNEAPOLIS, MN 55411	41-1914493	501(c)(3)	11,113.	0.			Scholarship
MINIAPPLE INTERNATIONAL MONTESSORI SCHOOL INC - 75 APPLE ORCHARD RD - DELLWOOD, MN 55110	41-1675091		23,307.	0.			Scholarship
BELLE PLAINE MEMORIES AND MILESTONES ACADEMY LLC - 1501 1ST ST NE - NEW PRAGUE, MN 56071	45-4324677		15,750.	0.			Scholarship
FRIDLEY UNITED METHODIST CHURCH 680 MISSISSIPPI ST NE FRIDLEY, MN 55432	41-1361668	501(c)(3)	10,507.	0.			Scholarship
CHABAD ACADEMY INC 1758 Ford Parkway Saint Paul, MN 55116	41-1763738	501(c)(3)	42,093.	0.			Scholarship
Rose of Sharon Lutheran Church 6875 Jamaica Avenue South Cottage Grove, MN 55016	41-0838036	501(c)(3)	7,186.	0.			Scholarship
Smart Start Childcare & Learning Center - 14480 60th Street North - Stillwater, MN 55082	46-1586546		5,904.	0.			Scholarship
ISD 283 - ST LOUIS PARK ATTN: TERRI JOHNSON ST LOUIS PARK, MN 55416	41-6001466	501(c)(3)	10,152.	0.			Scholarship

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
TIFFANY COLETTE ROBERTS 786 MAGNOLIA AVE E ST. PAUL, MN 55106	14-1996027		20,775.	0.			Scholarship
Hope Day Care LLC 2828 Univeristy Ave SE, Suite 125 Minneapolis, MN 55414	81-1406107		25,597.	0.			Scholarship
REDLEAF PRESS Lockbox #446079 Saint Paul, MN 55164	41-1260581	501(c)(3)	10,652.	0.			Scholarship
ISD NO 2754 Attn: Jody Rose Franklin, MN 55333	41-1811094		6,338.	0.			Scholarship
CHURCH OF NEW LIFE CHRISTIAN MINISTRIES - 8600 Bloomington Avenue South - Bloomington, MN 55425	41-1658986	501(c)(3)	39,247.	0.			Scholarship
SEWARD CHILD CARE 2323 32ND AVE S MINNEAPOLIS, MN 55406	41-1240047	501(c)(3)	7,277.	0.			Scholarship
LOVE TO GROW ON 6499 LAKOTA TRL LINO LAKES, MN 55014	41-1915522	501(c)(3)	6,780.	0.			Scholarship
MI FAMILIA CHILD CARE CENTER 2855 47th Street East Inver Grove Heights, MN 55076	45-5587465		34,695.	0.			Scholarship
TENDERCARE LEARNING CENTER LLC 8040 Old Cedar Ave South STE 3 Bloomington, MN 55425	81-2330797		53,037.	0.			Scholarship



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
LITTLE VOYAGEURS MONTESSORI SCHOOL INC - 825 51ST AVE NE - COLUMBIA HEIGHTS, MN 55421	41-1327355	501(c)(3)	26,299.	0.			Scholarship
RAINBOW CHILD DEVELOPMENT INC 605 Como Avenue Saint Paul, MN 55103	41-1915967		83,229.	0.			Scholarship
NEW HORIZON CHILD CARE INC 3405 ANNAPOLIS LN N PLYMOUTH, MN 55447	41-1569865		4,951,637.	0.			Scholarship
ST DAVIDS CENTER FOR CHILD AND FAMILY DEVELOPMENT - 3395 PLYMOUTH RD - MINNETONKA, MN 55305	41-1429208	501(c)(3)	14,737.	0.			Scholarship
CEDAR RIVERSIDE CHILD CARE CENTER 406 Cedar Ave. South Minneapolis, MN 55454	46-2350408		165,431.	0.			Scholarship
WAY TO GROW 201 Irving Ave N STE 100 MINNEAPOLIS, MN 55405	71-0956749	501(c)(3)	14,889.	0.			Scholarship
FERGUS FALLS COMMUNITY CHILD CARE CENTER - 120 W. EVERETT AVE - FERGUS FALLS, MN 56537	41-0976144		6,510.	0.			Scholarship
MIDWEST CHILD DEVELOPMENT LLC 1514 Englewood Avenue St. Paul, MN 55104	46-5605732		5,823.	0.			Scholarship
LAKES INTERNATIONAL LANGUAGE ACADEMY 246 11TH AVE SE FOREST LAKE, MN 55025	20-0393839		11,349.	0.			Scholarship

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
A CHANCE TO GROW INC 1800 Second Street NE Minneapolis, MN 55418	41-1444113		28,253.	0.			Scholarship
SHYAM LLC 9495 Garland Lane N Maple Grove, MN 55311	47-4722027		66,990.	0.			Scholarship
PHYLLIS WHEATLEY COMMUNITY CENTER 1301 10th Avenue North Minneapolis, MN 55411	41-0706132	501(c)(3)	107,622.	0.			Scholarship
EASTERN HEIGHTS LUTHERAN CHURCH 616 RUTH ST ST PAUL, MN 55119	41-0823000	501(c)(3)	34,908.	0.			Scholarship
LITTLE STEPS CHILDCARE LLC 906 DALE ST N ST PAUL, MN 55103	47-1890116		17,098.	0.			Scholarship
YWCA OF MINNEAPOLIS 1130 NICOLET MALL MINNEAPOLIS, MN 55403-2405	41-0693891	501(c)(3)	376,238.	0.			Scholarship
JEREMIAH PROGRAM 1510 LAUREL AVE S STE 100 MINNEAPOLIS, MN 55403	41-1801834	501(c)(3)	5,870.	0.			Scholarship
Edina Daycare LLC 3205 West 76th Street Edina, MN 55435	82-4336839		9,995.	0.			Scholarship
LAKESHORE LEARNING MATERIALS 2695 E DOMINGUEZ STREET CARSON, CA 90895	94-1525814		209,885.	0.			Scholarship

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
MOIN INCORPORATED 9780 BROOKVIEW CIR EDEN PRAIRIE, MN 55347	41-1671453		7,395.	0.			Scholarship
HALLIE Q BROWN COMMUNITY CENTER INC - 270 N KENT ST - ST PAUL, MN 55102	41-0693846	501(c)(3)	64,035.	0.			Scholarship
YMCA OF THE GREATER TWIN CITIES 651 NICOLLET MALL STE 500 MINNEAPOLIS, MN 55402	45-2563299	501(c)(3)	451,719.	0.			Scholarship
COMMUNITY ACTION PARTNERSHIPS RAMSEY & WASHINGTON COUNTIES - 450 S SYNDICATE ST - ST PAUL, MN 55104	41-0883443	501(c)(3)	224,750.	0.			Scholarship
ROOM FOR GROWING INC 268 SW 12th St Forest Lake, MN 55025	41-1543989		8,000.	0.			Scholarship
TINY TOTS & LITTLE TYKES 60 East Marie Ave., Ste. 100 West St. Paul, MN 55118	41-1527628	501(c)(3)	11,497.	0.			Scholarship
PUMPKIN PATCH - ZAKIA INC 14001 BURNHAVEN DR BURNSVILLE, MN 55337	61-1435063		25,800.	0.			Scholarship
CREATIVE KIDS ACADEMY 9100 Lake Drive Circle Pines, MN 55014	26-4136621		38,377.	0.			Scholarship
PLYMOUTH ACADEMY 911 PLYMOUTH AVE N MINNEAPOLIS, MN 53411	46-0999347		8,255.	0.			Scholarship

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
CITY CHILD CARE CENTER LLC 2628 Nicollet Ave S Minneapolis, MN 55408	47-4400216		26,000.	0.			Scholarship
CORNERSTONE MONTESSORI SCHOOL 1611 AMES AVE ST PAUL, MN 55106	41-1361913	501(c)(3)	47,165.	0.			Scholarship
CHURCH OF ST FRANCIS DE SALES 749 JUNO AVE ST PAUL, MN 55102	41-0721706	501(c)(3)	25,914.	0.			Scholarship
FAMILY OF CHRIST PRESCHOOL 16345 POLK STREET NE HAM LAKE, MN 55304	41-1347750		6,735.	0.			Scholarship
IHM-ST LUKES 1065 SUMMIT AVE ST PAUL, MN 55105	41-1691889		13,150.	0.			Scholarship
ES SBS CORCORAN LLC 4355 N Hwy 169 Plymouth, MN 55442	81-4259044		17,372.	0.			Scholarship
ES SBS ST ANTHONY LLC 4355 US-169 N PLYMOUTH, MN 55442	81-4232297		53,877.	0.			Scholarship
CHILDRENS COUNTRY DAY SCHOOL INC 1588 S VICTORIA RD MENDOTA HEIGHTS, MN 55118	41-1442559		7,500.	0.			Scholarship
CAROL MATHEY'S CENTER FOR CHILDREN AND FAMILIES INC - 6060 43RD ST N - OAKDALE, MN 55128	41-1647445	501(c)(3)	12,730.	0.			Scholarship

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
KHCD II INC 3405 Annapolis Lane North Plymouth, MN 55447	41-1665459		111,066.	0.			Scholarship
AMHERST H WILDER FOUNDATION CFS Billing 451 LEXINGTON PKWY N ST PAUL, MN 55104	41-0693889	501(c)(3)	94,418.	0.			Scholarship
EARLY ADVANTAGE DEVELOPMENTAL CHILD CARE CENTER LLC - 507 FRONTAGE RD NE - BYRON, MN 55920	45-4733218		14,155.	0.			Scholarship
STIM LEARNING CENTER 1201 W BROADWAY AVE MINNEAPOLIS, MN 55411	26-4379274		8,699.	0.			Scholarship
CHURCH OF THE SACRED HEART 4050 Hubbard Avenue North Minneapolis, MN 55422	41-0834785	501(c)(3)	15,015.	0.			Scholarship
APPLESEED MONTESSORI SCHOOL INC 6601 Bloomington Ave. S. Richfield, MN 55423	16-1723359		12,860.	0.			Scholarship
Mavis Adjei 765 TERRACE DRIVE ROSEVILLE, MN 55113	81-1299595		15,714.	0.			Scholarship
MIS AMIGOS SPANISH IMMERSION LLC 5411 CIRCLE DOWN GOLDEN VALLEY, MN 55416	20-3675365		35,613.	0.			Scholarship
SUNSHINE CARE CENTER MN 3418 E 25TH ST MINNEAPOLIS, MN 55406	82-3375014		6,462.	0.			Scholarship

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
THE CRAYON BOX CHILD CARE CENTER 7751 E RIVER RD FRIDLEY, MN 55432	26-1698534		29,494.	0.			Scholarship
FOR KIDS ONLY INC 13654 Thrush Street Northwest Andover, MN 55304	41-1664945		6,240.	0.			Scholarship
HAZEL PARK LEARNING CENTER 1831 MINNEHAHA AVE E ST PAUL, MN 55119	81-4816371		25,652.	0.			Scholarship
ISD 276 - MINNETONKA ATTN: MINNETONKA PRESCHOOL & ECFE 4584 VINE HILL ROAD - EXCELSIOR, MN 55331	41-6001402	501(c)(3)	7,500.	0.			Scholarship
Today's Life Eden Prairie LLC 12901 Roberts Dr. Eden Prairie, MN 55346	33-0997142		9,011.	0.			Scholarship
ISD 278 - ORONO 5050 Independence Street Maple Plain, MN 55359	41-6001403	501(c)(3)	6,326.	0.			Scholarship
ISD 284 - WAYZATA 17340 County Road 6 Plymouth, MN 55447	41-6001464	501(c)(3)	8,746.	0.			Scholarship
MINNESOTA WILDFLOWER MONTESSORI SCHOOL - 1330 Lagoon Ave - Minneapolis, MN 55408	82-3187122		120,913.	0.			Scholarship
JRP CHILDRENS SERVICES, INC. 10051 Xenia Avenue N Brooklyn Park, MN 55443	20-5138005		29,515.	0.			Scholarship

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
MES AMIS FRENCH SCHOOL LLC 1430 MEADOW CT CHASKA, MN 55318	20-2554487		5,351.	0.			Scholarship
CHILDRENS DISCOVERY CHILD CARE AND LEARNING INC - 3665 TALMAGE CIR - VADNAIS HEIGHTS, MN 55110	41-1391058		121,914.	0.			Scholarship
RACHELLE GASHO 1319 MINNEHAHA AVE W ST PAUL, MN 55104	26-1647576		7,468.	0.			Scholarship
ISD 273 - EDINA 5701 NORMANDALE RD EDINA, MN 55424	41-6001406	501(c)(3)	20,654.	0.			Scholarship
VIDEHI LARSON 6616 RIDGEVIEW DR EDINA, MN 55439	41-1782075		8,907.	0.			Scholarship
LA PETITE ACADEMY INC 32209 COLLECTION CENTER DR CHICAGO, IL 60693	43-1243221		30,333.	0.			Scholarship
URBAN LEARNING CENTER 2505 5th ave S Minneapolis, MN 55404	81-5188940		20,127.	0.			Scholarship
SPIRITUAL LIFE BIBLE COLLEGE 6865 SHINGLE CREEK PARKWAY BROOKLYN CENTER, MN 55430	20-5085101	501(c)(3)	31,797.	0.			Scholarship
LIVING CHRIST LUTHERAN CHURCH 820 LAKE DR Chanhassen, MN 55317	41-1340011	501(c)(3)	8,292.	0.			Scholarship

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HOoyo CHILD CARE 3600 NICOLLET AVE S MINNEAPOLIS, MN 55409	27-5560668		36,996.	0.			Scholarship
FUTURE SCHOLARS CHILD CARE CENTER 2652 CHICAGO AVE S MINNEAPOLIS, MN 55407	82-1735342		12,940.	0.			Scholarship
LIBAN CHILD CARE CENTER INC 3504 SNELLING AVE S MINNEAPOLIS, MN 55406	46-1491030		5,956.	0.			Scholarship
EXCELL ACADEMY FOR HIGHER LEARNING CHARTER SCHOOL - 5800 65th Ave N. - BROOKLYN PARK, MN 55429	41-1968867	501(c)(3)	23,790.	0.			Scholarship
MN BEST CHILDCARE CENTER 3018 17th Avenue South Minneapolis, MN 55407	46-0534634		10,428.	0.			Scholarship
BROOKDALE CHRISTIAN CENTER DAYCARE 6030 XERXES AVE N BROOKLYN CENTER, MN 55430	41-1298917	501(c)(3)	9,799.	0.			Scholarship
ELIM PRESCHOOL INC 685 13TH AVE NE MINNEAPOLIS, MN 55413	26-3996303	501(c)(3)	7,590.	0.			Scholarship
Kinder Village LLC 504 East Lynnhurst Avenue Saint Paul, MN 55104	80-0963612		5,048.	0.			Scholarship
HOPKINS EARLY LEARNING CENTER 125 Monroe Avenue South Hopkins, MN 55343	41-1408605	501(c)(3)	8,275.	0.			Scholarship



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MINNESOTA CHILD CARE CENTER 312 West Lake Street Minneapolis, MN 55408	46-5432100		17,564.	0.			Scholarship
RICHFIELD EVANGELICAL LUTHERAN CHURCH - 8 W 60TH ST - MINNEAPOLIS, MN 55419	41-0693948	501(c)(3)	31,615.	0.			Scholarship
PILLSBURY UNITED COMMUNITIES 3501 CHICAGO AVE S MINNEAPOLIS, MN 55407	41-0916478	501(c)(3)	44,282.	0.			Scholarship
MILLENNIUM LEARNING CENTER INC - Maple Knoll Way - 13961 Maple Knoll Way - Maple Grove, MN 55369	41-1961897		38,942.	0.			Scholarship
ANGELS LEARNING CENTER LLC 7624 BROOKLYN BLVD BROOKLYN PARK, MN 55443	45-3984850		51,001.	0.			Scholarship
MONTESSORI LEARNING LLC 1500 EDGEWOOD BLVD NORTH MANKATO, MN 56003	47-3568862		9,788.	0.			Scholarship
JAIN ENTERPRISES 10210 Lancaster Lane North Maple Grove, MN 55369	04-3775230		30,900.	0.			Scholarship
ST JOHN THE BAPTIST CATHOLIC CHURCH & SCHOOL - 835 2nd Avenue Northwest - New Brighton, MN 55112	41-0732498	501(c)(3)	13,639.	0.			Scholarship
ANEW DIMENSION CHILD ENRICHMENT CENTER - 1819 MINNEHAHA AVE S - MINNEAPOLIS, MN 55404	41-1628289	501(c)(3)	97,313.	0.			Scholarship

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ES SBS SOUTHDALÉ LLC 4355 N Hwy 169 Plymouth, MN 55442	81-4218249		26,085.	0.			Scholarship
Christ Evangelical Lutheran Church 32962 Vickers Street Northeast Cambridge, MN 55008	41-1292893	501(c)(3)	6,189.	0.			Scholarship
ALEXANDRA GOLOVKO 1370 E Arlington Avenue East Saint Paul, MN 55106	47-2819759		6,151.	0.			Scholarship
CASA DE CORAZON INC 8251 Elm Creek Boulevard North Maple Grove, MN 55369	26-2862666		39,892.	0.			Scholarship
ISD 270 - HOPKINS ATTN: LIZ HINDS 125 MONROE AVE S HOPKINS, MN 55343	41-6008248	501(c)(3)	12,046.	0.			Scholarship
SMILING FACES ACADEMY 2918 North 6th St Street Minneapolis, MN 55411	27-2399875		6,000.	0.			Scholarship
BLOOM EARLY LEARNING 17805 COUNTY RD 6 PLYMOUTH, MN 55447	41-1939043	501(c)(3)	72,062.	0.			Scholarship
THE FAMILY PARTNERSHIP 1527 E Lake Street MINNEAPOLIS, MN 55407	41-0693858	501(c)(3)	112,185.	0.			Scholarship
AYAN OMAR 3701 Jackson St. NE Columbia Heights, MN 55421	81-5413374		6,077.	0.			Scholarship

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NEW CREATIONS CHILDCARE 16547 MARKETPLACE DR BIG LAKE, MN 55309	82-1931422		35,233.	0.			Scholarship
New Creations Child Care and Learning Center - 11806 ABERDEEN STREET NE - BLAINE, MN 55449	82-1934757		6,387.	0.			Scholarship
NEW CREATIONS CHILDCARE AND LEARNING CENTER - 877 W JEFFERSON AVE - ST. PAUL, MN 55012	45-2102817		18,559.	0.			Scholarship
ST ALPHONSUS PARISH SCHOOL 7031 HALIFAX AVE N BROOKLYN CENTER, MN 55429	41-0846441		26,929.	0.			Scholarship
NC Properties at Andover LLC 11806 Aberdeen Street Northeast Blaine, MN 55449	82-1940679		7,356.	0.			Scholarship
Perspectives Inc 3381 Gorham Ave St Louis Park, MN 55426	41-1288300	501(c)(3)	8,435.	0.			Scholarship
OLUS CENTER LLC 1315 12TH AVE N MINNEAPOLIS, MN 55411	46-5562909		20,357.	0.			Scholarship
WESTWOOD LUTHERAN CHURCH 9001 CEDAR LAKE RD ST LOUIS PARK, MN 55426	41-0734779	501(c)(3)	7,437.	0.			Scholarship
LUCKY CHILD CARE CENTER 525 Northeast Lowry Avenue Minneapolis, MN 55418	46-1224233		22,979.	0.			Scholarship

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CIRCULO DE AMIGOS CHILD CARE CENTER LLC - 2830 CEDAR AVE S - MINNEAPOLIS, MN 55407	27-2100603		24,341.	0.			Scholarship
BABYS SPACE A PLACE TO GROW 2438 18th Avenue South Minneapolis, MN 55404	20-4502788	501(c)(3)	273,007.	0.			Scholarship
TWIN CITIES CHILD CARE CENTER 1925 Portland Avenue South Minneapolis, MN 55404	27-0297780		17,054.	0.			Scholarship
METRO LEARNING CENTER INC 2833 13TH AVE S STE 200 MINNEAPOLIS, MN 55407	82-3334358		25,237.	0.			Scholarship
ACADEMIA ELZE 4 W FRANKLIN AVE MINNEAPOLIS, MN 55404	82-4001502		25,521.	0.			Scholarship
SUMMIT EARLY LEARNING CENTER 1015 OLSON MEMORIAL HWY MINNEAPOLIS, MN 55405	41-1855935		57,615.	0.			Scholarship
NOKOMIS DAYCARE CENTER INC 4010 BLOOMINGTON AVE S MINNEAPOLIS, MN 55407	45-4189885		9,063.	0.			Scholarship
OPEN ARMS EDUCATION & CHILD CARE CENTER - 3355 Hiawatha Avenue - Minneapolis, MN 55406	27-1123534		12,110.	0.			Scholarship
WECARE CHILDCARE CENTER 3553 Penn Ave N Minneapolis, MN 55412	81-1102083		18,057.	0.			Scholarship

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ARTA CHILD CARE CENTER INC 3401 CHICAGO AVE S MINNEAPOLIS, MN 55407	46-2842530		6,150.	0.			Scholarship
SUZETTE HUSTON 5547 YATES AVE N CRYSTAL, MN 55429	27-2477431		6,780.	0.			Scholarship
MARY SCHUNEMAN 1490 Terrace Dr Shoreview, MN 55126	41-2021250		5,450.	0.			Scholarship
ST PAULS CHILDHOOD CENTER 900 SUMMIT AVE ST PAUL, MN 55105	41-1377467	501(c)(3)	8,643.	0.			Scholarship
ST AMBROSE OF WOODBURY ATTN: ANNE HUBER 4125 WOODBURY DR WOODBURY, MN 55129	41-1905541	501(c)(3)	18,920.	0.			Scholarship
MY CHILDCARE PLUS INC 1323 BURR ST ST PAUL, MN 55130	82-0638294		20,993.	0.			Scholarship
MILLENNIUM LEARNING CENTER INC - Blaine PKWY - 1390 PAUL PARKWAY - BLAINE, MN 55434	27-2293263		14,016.	0.			Scholarship
TUTOR TIME LEARNING CENTER LLC 32209 Collection Center Drive Chicago, IL 60693	36-4500741		178,842.	0.			Scholarship
World Around Us Childcare - White Bear Lake - 5065 Stewart Avenue - White Bear Lake, MN 55110	41-1887084		5,872.	0.			Scholarship

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Rise N Shine Child Care Center 4749 HIAWATHA AVE S MINNEAPOLIS, MN 55406	36-4709724		8,343.	0.			Scholarship
CLOSE TO MY HEART 1740 VAN DYKE ST MAPLEWOOD, MN 55109	41-1847732	501(c)(3)	92,816.	0.			Scholarship
LAKE AREA DISCOVERY CENTER 3770 BELLAIRE AVE WHITE BEAR LAKE, MN 55110	41-1937239	501(c)(3)	73,165.	0.			Scholarship
PARENTS IN COMMUNITY ACTION INC 700 HUMBOLDT AVE N MINNEAPOLIS, MN 55411	41-0956226	501(c)(3)	292,498.	0.			Scholarship
3 RS EARLY CHILDHOOD LEARNING CENTER - 4900 85TH AVE N - BROOKLYN PARK, MN 55443	37-1580191		136,038.	0.			Scholarship
FAMILYWISE SERVICES 3036 University Avenue Southeast Minneapolis, MN 55414	41-1343909	501(c)(3)	39,328.	0.			Scholarship
MOUNT CALVARY LUTHERAN CHURCH MOUNT CALVARY PRESCHOOL 301 CTY RD EXCELSIOR, MN 55331	41-0870777	501(c)(3)	15,958.	0.			Scholarship
MACHUPICHU 7 LLC 1601 NICOLLET AVE MINNEAPOLIS, MN 55403	27-0524684		65,044.	0.			Scholarship
CAMDEN KIDS LEARNING CENTER 4656 COLFAX AVE N MINNEAPOLIS, MN 55412	81-2858432		10,401.	0.			Scholarship

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PEACE OF MIND DAYCARE INC 9025 TAMARACK RD WOODBURY, MN 55125	41-1739539		21,555.	0.			Scholarship
ES SBS BROOKLYN PARK 4355 N Hwy 169 Plymouth, MN 55442	81-4309057		140,143.	0.			Scholarship
ES SBS PLYMOUTH LLC 4355 HWY 169 N PLYMOUTH, MN 55442	81-4246308		46,279.	0.			Scholarship
Millennium Learning Center - Eagan 4565 Scott Trail Eagan, MN 55122	81-2660774		5,940.	0.			Scholarship
PLAYHOUSE CHILD CARE OF MONTICELLO INC - 2901 Clearwater Road - St. Cloud, MN 56301	41-1732258		7,605.	0.			Scholarship
THE CHILDREN'S CENTER 605 JAMES AVE ALBERT LEA, MN 56007	41-0954380		17,448.	0.			Scholarship
NEXT BEST THING TO MOM 390 OPPORTUNITY BLVD N CAMBRIDGE, MN 55008	41-1943204		8,812.	0.			Scholarship
A & M CHANHASSEN CHILDCARE INC 1430 PARK CT CHANHASSEN, MN 55317	47-4632146		27,051.	0.			Scholarship
KUEHG Corp PO Box 741282 Los Angeles, CA 90074-1282	47-4478313		2,159,386.	0.			Scholarship

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HOLY EMMANUEL LUTHERAN CHURCH OPEN ARMS CHRISTIAN ECC - 201 EAST 104TH STREET - BLOOMINGTON, MN 55420	41-6049656	501(c)(3)	5,048.	0.			Scholarship
COMO COMMUNITY CHILD CARE 1024 27th Avenue Southeast Minneapolis, MN 55414	41-1250693	501(c)(3)	12,662.	0.			Scholarship
UNITED CHILD CARE CENTER 8353 EXCELSIOR BLVD HOPKINS, MN 55343	47-5262124		22,303.	0.			Scholarship
WAYNAPICHU LLC 1601 Nicollet Ave Minneapolis, MN 55403	80-0512565		13,584.	0.			Scholarship
ES SBS MAPLE LLC 4355 Hwy 169 N Plymouth, MN 55442	81-4264126		44,525.	0.			Scholarship
MONTESSORI AMERICAN INDIAN CHILDCARE CENTER - 1909 Ivy Avenue East - Saint Paul, MN 55119	47-0972540		28,609.	0.			Scholarship
ST JOHNS CHURCH OF LITTLE CANADA 380 LITTLE CANADA RD LITTLE CANADA, MN 55113	41-0781158	501(c)(3)	6,662.	0.			Scholarship
TODAYS LIFE BROOKLYN PARK LLC 12901 Roberts Dr. Eden Prairie, MN 55346	33-0997142		55,021.	0.			Scholarship
ATHLOS LEADERSHIP ACADEMY 10100 NOBLE PKWY N BROOKLYN PARK, MN 55443	41-1822009		5,187.	0.			Scholarship



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ALL AGES AND FACES ACADEMY 580 Fuller Ave Saint Paul, MN 55103-2245	81-2775730		31,561.	0.			Scholarship
CEDAR CHILD CARE CENTER 3011 CEDAR AVE S MINNEAPOLIS, MN 55407	81-1252559		23,362.	0.			Scholarship
RHONDA HENNEN 3913 GAMES DR MINNESTRISTA, MN 55375	45-0501751		5,935.	0.			Scholarship
CHRISTIANAH ADENIYI 2645 MATILDA ST ROSEVILLE, MN 55113	27-0674941		5,776.	0.			Scholarship
ISD 272 - EDEN PRAIRIE 8100 School Road Eden Prairie, MN 55344	41-6001462	501(c)(3)	25,008.	0.			Scholarship
TORAH ACADEMY 2800 JOPPA AVE ST LOUIS PARK, MN 55416	41-6007486		120,891.	0.			Scholarship
PEOPLE SERVING PEOPLE INC 614 S 3RD ST MINNEAPOLIS, MN 55415	41-1443148		54,548.	0.			Scholarship
A & M CHASKA CHILDCARE INC 2440 CHASKA BLVD CHASKA, MN 55318	47-4632078		11,812.	0.			Scholarship
WORLD AROUND US CHILD CARE 5065 Stewart Avenue White Bear Lake, MN 55110	41-1887084		40,025.	0.			Scholarship

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LA CRECHE EARLY CHILDHOOD CENTERS 1800 OLSON MEMORIAL HWY MINNEAPOLIS, MN 55411	41-0958652	501(c)(3)	242,449.	0.			Scholarship
CENTRO TYRONE GUZMAN 1915 CHICAGO AVE. S. MINNEAPOLIS, MN 55404	41-1290349	501(c)(3)	12,468.	0.			Scholarship
Child Care Core Consulting LLC 4000 West 76th Street Edina, MN 55435	81-5383861		5,000.	0.			Scholarship
Nancy Schmidt 4345 Hamlet Avenue North Oakdale, MN 55128	90-0255971		5,662.	0.			Scholarship
CHURCH OF ST JEROME 384 E ROSELAWN AVE MAPLEWOOD, MN 55117	41-0773779	501(c)(3)	42,946.	0.			Scholarship
CHURCH OF THE NATIVITY OF MARY 9901 E BLOOMINGTON FREEWAY BLOOMINGTON, MN 55420	41-0735359	501(c)(3)	8,783.	0.			Scholarship
ST PASCAL REGIONAL CATHOLIC SCHOOL 1757 Conway St St. Paul, MN 55106	84-1943812		11,123.	0.			Scholarship
STEP BY STEP MONTESSORI MAPLE GROVE - 11601 73RD AVE N - MAPLE GROVE, MN 55369	41-1801946		6,489.	0.			Scholarship
HOLLY TAYLOR 4622 CEDAR AVE. S. MINNEAPOLIS, MN 55407	82-3950861		7,276.	0.			Scholarship

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JAIN ENTERPRISES INC III 8400 CITY CENTRE DR WOODBURY, MN 55125	47-1843383		5,084.	0.			Scholarship
MATERNITY OF MARY ST ANDREW SCHOOL 592 ARLINGTON AVE W ST PAUL, MN 55117	41-1654467	501(c)(3)	20,625.	0.			Scholarship
ISD 282 - ST ANTHONY-NEW BRIGHTON 3303 33RD AVE NE ST ANTHONY, MN 55418	41-6001400	501(c)(3)	16,492.	0.			Scholarship
FRASER 2400 W 64TH ST RICHFIELD, MN 55423	41-0781858	501(c)(3)	20,264.	0.			Scholarship
KIDS HAVEN LLC 302 12TH AVE S BUFFALO, MN 55313	47-2887703		10,466.	0.			Scholarship
CONCORDIA UNIVERSITY 1282 Concordia Avenue Saint Paul, MN 55104	41-0696906	501(c)(3)	7,705.	0.			Scholarship
NORTHERN VOICES 1660 CTY RD B W ROSEVILLE, MN 55113	41-1930941	501(c)(3)	23,266.	0.			Scholarship
UN MUNDO NUEVO SPANISH IMMERSION CHILDRENS ACADEMY INC - 7275 147TH ST W - APPLE VALLEY, MN 55124	81-2471898		21,140.	0.			Scholarship
COMMUNITY OF SAINTS REGIONAL CATHOLIC PRESCHOOL - 335 HURLEY ST E - WEST ST PAUL, MN 55118	45-4804818	501(c)(3)	8,694.	0.			Scholarship

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LEARN & GROW CHILD CARE CTR SOUTH 1201 89TH AVE NE STE 120 BLAINE, MN 55434	68-0585891	501(c)(3)	25,968.	0.			Scholarship
LIFETRACK RESOURCES INC 709 University Ave W Saint Paul, MN 55104	41-0874507	501(c)(3)	14,438.	0.			Scholarship
SUNNY HOLLOW MONTESSORI 636 S MISSISSIPPI RIVER BLVD S ST PAUL, MN 55116	41-1408529	501(c)(3)	7,500.	0.			Scholarship
MAYFLOWER EARLY CHILDHOOD CENTER 106 EAST DIAMOND LAKE RD MINNEAPOLIS, MN 55419	27-1543720	501(c)(3)	41,778.	0.			Scholarship
SPECIAL SCHOOL DIST 1 - MINNEAPOLIS - 3017 E 31ST ST - MINNEAPOLIS, MN 55406	41-0851980	501(c)(3)	9,096.	0.			Scholarship
CHURCH OF ST PETER OF NORTH ST. PAUL - 2600 N MARGARET ST - NORTH ST PAUL, MN 55109	41-0838644	501(c)(3)	11,654.	0.			Scholarship
CHOO CHOO MONTESSORI LLC 2617 Duluth Street Maplewood, MN 55109	27-2894890		25,693.	0.			Scholarship
STEP BY STEP MONTESSORI SCHOOL OF BROOKLYN PARK - 8455 W BROADWAY AVE N - BROOKLYN PARK, MN 55455	41-1784119		8,464.	0.			Scholarship
Cathedral Hill Montessori 329 Dayton Ave Saint Paul, MN 55102	45-1062357	501(c)(3)	13,409.	0.			Scholarship

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
Tierra Encantada-Eagan 4008 Minnehaha Avenue Minneapolis, MN 55406	46-1695019		5,000.	0.			Scholarship
ABC123 CHILD ENRICHMENT CENTER LLC 1710 Center Avenue West Dilworth, MN 56529	47-3301517		25,875.	0.			Scholarship
New Day Family Child Care Center LLC - 4555 North Dupont Avenue - Minneapolis, MN 55412	84-4213482		7,225.	0.			Scholarship

**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
Scholarships	194	1,844,393.	0.		

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

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**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

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
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2020

**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)	197,388.	0.	1,524.	25,093.	16,630.	240,635.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Mark Cross Chief Operating Officer	(i)	169,301.	0.	792.	6,740.	0.	176,833.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**Part III Supplemental Information**

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

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**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **Think Small** Employer identification number **41-1260581**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies	X	4	70,125.	MARKET VALUE
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( Baby Wipes )	X	1	60,840.	Market Value
26 Other ▶ ( DVD Media )	X	1	6,000.	Market Value
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2020

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Schedule M, Part I, Column (b):

The numbers in this column represent the number contributions. It does not represent the number of individual items contributed.

**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

Think Small

Employer identification number

41-1260581

Form 990, Part III, Line 4a, Program Service Accomplishments:

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:

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.

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.

Name of the organization

Think Small

Employer identification number

41-1260581

Form 990, Part III, Line 4c, Program Service Accomplishments:

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 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.

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.

Name of the organization

Think Small

Employer identification number

41-1260581

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, 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.

Form 990, Part XII, Line 2c:

No change from prior year.