	~	<b>~</b> ~	** PUBLIC DISCLOSURE COP Return of Organization Exempt F	PY ** rom li	ncome Tax	OMB No. 1545-0047
Forr	n <b>y</b>	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue (			s) <b>2023</b>
		of the Treasury	Do not enter social security numbers on this form as	-		Open to Public
Interr	al Reve	enue Service	Go to www.irs.gov/Form990 for instructions and th			Inspection
<u>A</u> F	or th	e 2023 calenda	ar year, or tax year beginning $ m JUL1$ , $2023$ and e	ending J	<u>UN 30, 2024</u>	
B c a	heck if pplicab	le:	organization		D Employer identific	ation number
	Addre chang	ge Thin	k Small			
	Name chang Initial	ge Doing bu	usiness as		41-126058	31
	returr	Number	,	Room/suite	E Telephone number	
	Final returr termi	2	orkton Court		651-641-0	
	ated Amer	City or to	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	42,778,148.
	_returr Appli	Sain	t Paul, MN 55117		H(a) Is this a group re	
	tion pendi		nd address of principal officer: Cisa Keller		for subordinates?	
	-	same	as C above		H(b) Are all subordinates ind	
			X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or	r 527	1 '	list. See instructions
	Vebsi	_	thinksmall.org		H(c) Group exemption	
	orm o art I		X Corporation Trust Association Other	<b>L</b> Year	of formation: 1975 M	I State of legal domicile <b>: MN</b>
FC		Summary				a and
ø	1		e the organization's mission or most significant activities: <u>To ad</u> on of children in their crucial ear			
anc						
Governance	2	Check this bo				
Š						<u>    16</u> 16
	4		ependent voting members of the governing body (Part VI, line 1b)			138
ies			of individuals employed in calendar year 2023 (Part V, line 2a)			138
Activities &	6		of volunteers (estimate if necessary)			0.
Ä					7a 7b	0.
	<u>а</u>	Net unrelated	business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year
	8	Contributions	and grants (Part VIII, line 1h)		35,477,394.	39,911,594.
Iue	9				250,210.	247,325.
Revenue		•	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)		81,571.	135,733.
Re			(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,566,026.	1,648,261.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		37,375,201.	41,942,913.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		25,354,647.	28,221,781.
	14		o or for members (Part IX, column (A), line 4)		0.	0.
	40	0.1	(A) $(A)$ $(A)$		7,597,251.	7,554,719.
sec	16a	Professional fu	undraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b	Total fundraisi	ndraising fees (Part IX, column (A), line 11e)	3.		
ы			es (Part IX, column (A), lines 11a-11d, 11f-24e)		3,170,291.	3,731,181.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		36,122,189.	39,507,681.
	19		expenses. Subtract line 18 from line 12		1,253,012.	2,435,232.
or					ginning of Current Year	End of Year
Net Assets or	20	Total assets (F	Part X, line 16)		9,957,686.	10,592,175.
Ass	21	5,206,001.	3,269,697.			
[Net	22	Net assets or	(Part X, line 26) fund balances. Subtract line 21 from line 20		4,751,685.	7,322,478.
Pa	irt II	Signature				
Und	er pen	alties of perjury,	declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is
true,	corre	ct, and complete.	Declaration of preparer (other than officer) is based on all information of which	ch preparer	has any knowledge.	

Sign Here	Signature of officer Cisa Keller, President and CEO Type or print name and title	Date
Paid Preparer	Print/Type preparer's namePreparer's signatureDateSteven D. Anseth, CPASteven D. Anseth, CP 03/2Firm's nameAbdo LLP	6/25 Firm's EIN 41-1397419
Use Only	Firm's address 5201 Eden Ave, Ste 250 Edina, MN 55436	Phone no. 952.835.9090
	RS discuss this return with the preparer shown above? See instructions	X Yes No Form <b>990</b> (2023)

orm	1 990 (2023) Think Small 41-1260581	- Page
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	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	
		es XI
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	es XI
	If "Yes," describe these changes on Schedule O.	
ŀ	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expense	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses	, and
	revenue, if any, for each program service reported.	
la		
	Supporting Parents and Families:	
	Think Small recognizes that supporting parents is critical to	
	supporting their children's early learning and education. We awarde	
	more than \$20 million of financial assistance to 5,427 children so	
	they could attend quality child care. Think Small also continued to	
	offer a free statewide texting program called ParentPowered Texts,	
	which parents of children ages 0-5 receive three texts per week rel	lated
	to their child's age and development. In 2024, 5,865 families were	- 1
	enrolled in this program and over 750,000 text messages were delive	ered.
		- 410
b	(Code: ) (Expenses \$ 8,515,686. including grants of \$ 2,474,021. ) (Revenue \$ 1,806	5,41/
	Preparing Providers:	
	In an effort to continuously improve the quality of early care and	
	education that children receive, Think Small provided professional	
	development opportunities and coaching to educators in early care a	
	education. In 2024, nearly 18,000 educators enrolled in professiona	
	development courses. Additionally, Think Small Institute added 15 m	
	courses and delivered workshops at national conferences to over 200	,
	people. We also created more holistic programs for educators that combined Think Small Institute trainings and Redleaf Press material	0
	combined mink small institute trainings and kedieal riess material	.5.
<u> </u>	(Code:) (Expenses \$635,294. including grants of \$) (Revenue \$)	
-	Catalyzing Change	
	Think Small worked to improve access to child care in Minnesota. We	a led
	collaborative advocacy efforts in support of legislation in Minnesc	
	which would ensure that no family pays more than 7% of their income	
	child care. Similarly, we worked to extend previously passed	
	legislation that mandated evidence-based literacy in public schools	s. to
	early childhood programs.	.,
d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
e	Total program service expenses 37,830,884.	
-		m <b>990</b> (20
2002	2 12-21-23	,,
	3	

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Form	990 (2023) Think Small 41-1260	)581	P	age <b>3</b>
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			77
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			77
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		77	
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	44.		v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	44.1	х	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	4.44		х
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	100	х	
Ь	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	106		х
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
				X
14а ь	Did the organization maintain an office, employees, or agents outside of the United States?	<u>14a</u>		- 11
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes."			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	х	
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1 4	Continued)		<b>r</b>	<del></del>
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		v	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		х	
04.0	Schedule J	23	Λ	
<b>2</b> 4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	24a		x
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
U		24c		
Ь	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2.70		
204	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 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? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			- v
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	0-		x
00	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	20	х	
Pa	Note: All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance	38	л	<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
	הוסטול זו סטרופענוב ט סטרוגמוזס מ ובסטטרוסב טו דוטנב נט מוזץ וווים ווז נדווס דמול ע	<u></u>	Vac	
1~	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1a2 / 9Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
U	(gambling) winnings to prize winners?	1c	х	
				·

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Form 990 (2023) Think Small Part IV Checklist of Required Schedules

Form	990 (2023) Think Small 41-12	260581	P	age <b>5</b>				
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a	.38						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2</b> b	X	x				
	· · · · · · · · · · · · · · · · · · ·							
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<u>3b</u>		<u> </u>				
4a	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)?	<u>4a</u>		X				
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).			37				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X				
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v				
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		_X_				
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ch						
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	<u>6b</u>						
7		/or2 <b>70</b>		х				
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 pa If "Yes," did the organization notify the donor of the value of the goods or services provided?			- 23				
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
C	to file Form 8282?	7c		х				
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10						
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76 7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
•	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	<u>13a</u>						
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
_	organization is licensed to issue qualified health plans 13b							
	Enter the amount of reserves on hand	14a		x				
	Did the organization receive any payments for indoor tanning services during the tax year?	·····						
b 15	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> " <i>No</i> ," <i>provide an explanation on Schedule O</i>							
15	excess parachute payment(s) during the year?	15		х				
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х				
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17						
	If "Yes," complete Form 6069.							
332005	12-21-23	Forn	<b>990</b>	(2023)				

	990 (2023) Think Small TVI Governance, Management, and Disclosure. For each "Yes" response to lines 2 t		260581 for a "No" r	resnov	Page
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule C			cspoi	130
	Check if Schedule O contains a response or note to any line in this Part VI				
Sec	tion A. Governing Body and Management				
				Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	16		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	16		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship				
	officer, director, trustee, or key employee?		2		2
3	Did the organization delegate control over management duties customarily performed by or under th				
	of officers, directors, trustees, or key employees to a management company or other person?	•	3		2
4	Did the organization make any significant changes to its governing documents since the prior Form S				2
5	Did the organization become aware during the year of a significant diversion of the organization's as				2
6	Did the organization have members or stockholders?				2
	Did the organization have members, stockholders, or other persons who had the power to elect or ap				
	more members of the governing body?		7a		2
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s				
5	persons other than the governing body?		7b		2
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				-
	The governing body?		8a	x	
h	Each committee with authority to act on behalf of the governing body?			X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea				
Ŭ	organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>		9		2
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re		0		
		venue coue.)		Yes	N
10a	Did the organization have local chapters, branches, or affiliates?		10a		
	If "Yes," did the organization have written policies and procedures governing the activities of such ch				+
			10b		
<b>1</b> 1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod			X	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	x	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i>				
Ŭ	on Schedule O how this was done	,	12c	x	
13	Did the organization have a written whistleblower policy?			X	
14	Did the organization have a written document retention and destruction policy?			X	
5	Did the process for determining compensation of the following persons include a review and approva				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
~	The organization's CEO, Executive Director, or top management official		15a	Х	
				X	-
D	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		150	- 23	
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	mont with a			
108			160		2
L	taxable entity during the year?		<u>16a</u>		1
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		10		
<u>````</u>	exempt status with respect to such arrangements?		<b>16</b> b		
17	List the states with which a copy of this Form 990 is required to be filed <u>MN</u>				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	nd 990-T (section 501(	c)(3)s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.				
		n on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	onflict of interest policy	, and finand	cial	
	statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks and records			
	The Organization - 651-641-0305				
	10 Yorkton Court, Saint Paul, MN 55117			000	
2006	5 12-21-23		Form	ן <b>990</b>	(20
• •					· - ·
/03	26 759492 48662 2023.05070 THINK SM	ALL		48	56F

2\_\_\_1

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	ition		ne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	s both	an	compensation	compensation	amount of
	week		cer an	ia a a	recio	r/trus	.ee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation from the
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	organization
	organizations	ruste	l trus		/ee	m pe n		1099-NEC)	1033-1120)	and related
	below	dual t	Institutional trustee	-	Key employee	st col	er			organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			C C
(1) Barbara Yates	50.00									
President and CEO				Х				239,319.	0.	33,192.
(2) Mark Cross	40.00									
Chief Operating Officer				Х				191,141.	0.	11,415.
(3) Cisa Keller	40.00									
SVP EC Quality Development						Х		143,218.	0.	9,090.
(4) Jonathan May	40.00									
VP of Innovations & Development						Х		129,361.	0.	6,459.
(5) Wendy Nielsen	40.00									
Director of Early Childhood Supports						Х		103,824.	0.	28,289.
(6) Tracy Nordstrom	1.00									
Chair		Х		Х				0.	0.	0.
(7) Jaylon Rosenblum	1.00									
Vice Chair		Х		Х				0.	0.	0.
(8) Tanya Skogerboe	1.00									
Treasurer		Х		Х				0.	0.	0.
(9) Margeaux King	1.00									
Secretary		Х		Х				0.	0.	0.
(10) Robbin Johnson	1.00									
Director		Х						0.	0.	0.
(11) Arthur Rolnick	1.00									
Director		Х						0.	0.	0.
(12) Cory Padesky	1.00									
Director		Х						0.	0.	0.
(13) Fred Senn	1.00									
Director		Х						0.	0.	0.
(14) Molly Sullivan	1.00									
Director		Х						0.	0.	0.
(15) Jim Sparks	1.00									
Director		Х						0.	0.	0.
(16) Andrea Stern	1.00									
Director		Х						0.	0.	0.
(17) Megan Gunnar	1.00									
Director		Х						0.	0.	0.
332007 12-21-23										Form <b>990</b> (2023)

332007 12-21-23

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Form	990 (2023) Think Sma	all								41-12	60	581 Page <b>8</b>
Par	t VII Section A. Officers, Directors, Trus	tees, Key Emp	ploy	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)		
							l than o s both		<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	ר ר	<b>(F)</b> Estimated amount of
		week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer Officer		Highest compensated stant, u	Former (ae	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MIS( 1099-NEC)		other compensation from the organization and related organizations
	Andrea Singh ctor	1.00	x						0.		0.	0.
	Angela Bissen	1.00	~						0.		••	0.
	ctor	1.00	х						0.		0.	0.
	Andre Dukes	1.00									-	
Dire	ctor		х						0.		0.	0.
(21)	Yolanda Majors	1.00										
Dire	ctor		Х						0.		0.	0.
1b	Subtotal								806,863.		0.	88,445.
с	Total from continuation sheets to Part VI	I, Section A							0.		0.	0.
d	Total (add lines 1b and 1c)								806,863.		0.	88,445.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	d ab	ove	) who	o re	eceived more than \$100,	000 of reportable		7
3	Did the organization list any <b>former</b> officer,	director, truste	ee, k	xey e	empl	oye	e, or	hig	hest compensated emp	loyee on	[	Yes No
	line 1a? If "Yes," complete Schedule J for s	uch individual										3 X
4	For any individual listed on line 1a, is the su											
_	and related organizations greater than \$150	,		•								4 X
5	Did any person listed on line 1a receive or a	-				-			-			5 X
Sec	rendered to the organization? If "Yes," con tion B. Independent Contractors	iplete Schedule	<u> </u>	or su	icn į	bers	on .					5 1
1	Complete this table for your five highest co the organization. Report compensation for	-									ensat	ion from
	(A)				<u>.</u> g w				(B)			(C)
	Name and business	address							Description of s	ervices	С	ompensation
<u>30(</u>	ech Partners Inc ) 2nd Street NW, New Br	ighton,	М	N	55	11	2		IT Support			479,112.
	nklin Lake LLC					4 ~			- 11 -			100 000
	) Desnoyer Avenue, Sair	it Paul,	M	N	55	10	4		Lobbying			198,900.
	rsa Press Inc 55 Spring Bay Road, Eas	st Peori	a,	I	L	61	611		Printing & B Books	inding		147,644.
2	Total number of independent contractors (i	•	ot lin	nitec	d to	thos 3		ed	above) who received mo	ore than		
	\$100,000 of compensation from the organi	zation				3	,					Form <b>990</b> (2023)

ar	t VIII	2023) Thi Statement of Re	ven	ue						
		Check if Schedule O	conta	ains a respo	onse	or note to any line	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue		(D) Revenue exclu from tax und sections 512 -
S	1 a	Federated campaigns		1a						
IUN		Membership dues								
e M		Fundraising events								
and Other Similar Amounts		Related organizations								
Ē	е	Government grants (conti	ibutio	ons) <b>1e</b>		32,656,969.				
2	f	All other contributions, gifts,	grant	s, and						
tne		similar amounts not included	l abov	e 1f		7,254,625.				
D	g	Noncash contributions included in	lines 1	a-1f <b>1g</b>	\$					
an	h	Total. Add lines 1a-1f					39,911,594.			
						Business Code				
	2 a	Professional Develo	pmen	t		624410	244,899.	244,899.		
e	b	Other Program Service Fees				624410	2,426.	2,426.		
Revenue	с					ļ ļ				
ev.	d									
Ľ	е									
		All other program service								
	g	Total. Add lines 2a-2f					247,325.			
	3	Investment income (inclue	•							
		other similar amounts)				135,733.			135,7	
	4	Income from investment of	•	•	F					
	5	Royalties					59,339.			59,3
	-			(i) Rea		(ii) Personal				
		Gross rents	6a	29,	830. 0.					
		Less: rental expenses	6b	20	830.					
		Rental income or (loss)	6c	29,	830.		29,830.			29,8
		Net rental income or (loss	))	(i) Securi	tioe	(ii) Other	29,030.			29,0
	7а	Gross amount from sales of	7-		1105					
	<b>b</b>	assets other than inventory	7a							
	b	Less: cost or other basis	7b							
	•	and sales expenses								
		Gain or (loss) Net gain or (loss)								
		Gross income from fundraisi								
	0 4	including \$								
		contributions reported on								
		Part IV, line 18		,	8a					
	b	Less: direct expenses								
		Net income or (loss) from								
		Gross income from gamir								
		Part IV, line 19								
	b	Less: direct expenses								
		Net income or (loss) from								
	10 a	Gross sales of inventory,	less r	eturns						
		and allowances			10a					
	b	Less: cost of goods sold			10b	835,235.				
	с	Net income or (loss) from	sales	of invento	ory		1,559,092.	1,559,092.		
						Business Code				
Ð	11 a					ļ ļ				
enu	b					ļ ļ				
Hevenue	с					ļ ļ				
Г	d	All other revenue								
	е	Total. Add lines 11a-11d								
	12	Total revenue. See instruction	200				41,942,913.	1,806,417.	0.	224,9

Form 990 (2023) Think Small
Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp			ipiele column (A).	
	Check if Schedule O contains a respor	(A)	(B)	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	<b>(B)</b> Program service	Management and	<b>(D)</b> Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations	26,832,643.	26,832,643.		
~	and domestic governments. See Part IV, line 21	20,052,045.	20,052,045.		
2	Grants and other assistance to domestic	1 200 120	1 200 120		
	individuals. See Part IV, line 22	1,389,138.	1,389,138.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		410 800	26.000	12 000
	trustees, and key employees	469,534.	418,796.	36,929.	13,809.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,988,913.	5,348,053.	460,082.	180,778.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	25,200.	22,059.	2,707. 65,255.	434.
9	Other employee benefits	607,380.	531,673.	65,255.	<u>434.</u> <u>10,452.</u>
10	Payroll taxes	463,692.	415,893.	34,504.	13,295.
11	Fees for services (nonemployees):				
а	Management				
	Legal	18,232.		18,232.	
	Accounting	60,156.		60,156.	
	Lobbying	210,156.	210,156.		
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	29,919.		29,919.	
	Other. (If line 11g amount exceeds 10% of line 25,			,	
3	column (A), amount, list line 11g expenses on Sch 0.)	1,287,351.	711,128.	533,879.	42,344.
12	Advertising and promotion	412,016.	405,422.	6,594.	
13	Office expenses	265,870.	242,994.	22,633.	243.
14	Information technology	510,202.	494,428.	13,494.	2,280.
15	Royalties	510/2020	19171200		2,2001
16		232,302.	229,299.	803.	2,200.
		31,384.	23,711.	9.	7,664.
17	Travel Payments of travel or entertainment expenses	51,504.	25,711.	J.	7,0040
18					
	for any federal, state, or local public officials	97,955.	68,192.	25,628.	4,135.
19	Conferences, conventions, and meetings	1,895.	00,192.		4,155.
20	Interest	т,093.		1,895.	
21	Payments to affiliates	277 1 60		14 601	
22	Depreciation, depletion, and amortization	377,169.	362,568.	14,601.	
23	Insurance	97,333.	56,162.	41,171.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а	Credit Card/Bank Fees	47,734.	36,212.	8,814.	2,708.
b	Subscriptions and dues	23,134.	18,052.	5,082.	
с	Supplies	14,459.	3,865.	3,983.	6,611.
d	Equipment	13,914.	10,440.	3,474.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	39,507,681.	37,830,884.	1,389,844.	286,953.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
33201	0 12-21-23				Form <b>990</b> (2023)
		11			(=====)

33

Total liabilities and net assets/fund balances

9,957,686.

33

		Check if Schedule O contains a response or not	e to any	/ line in this Part X	<b>(A)</b> Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			6,834.	1	497,549.
	2	Savings and temporary cash investments	0,0010	2			
	3		2,362,349.	3	3,072,206.		
	4	Pledges and grants receivable, net Accounts receivable, net			3,458,582.	4	512,903.
	5	Loans and other receivables from any current or			0,100,0011	-	011,0001
	Ŭ	trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualif				5	
	U	under section 4958(f)(1)), and persons described		6			
	7	Notes and loans receivable, net		· · · · · · · · · · · · · · ·		7	
Assets	8				413,651.	8	369,870.
Ass	9	Inventories for sale or use			222,110.	<u> </u>	174,083.
		· · · · · · · · · · · · · · · · · · ·		·····	222,110.	9	1/4,005.
	10a	Land, buildings, and equipment: cost or other	100	4,599,864.			
	h	basis. Complete Part VI of Schedule D		4,023,979.	702,182.	10c	575,885.
		Less: accumulated depreciation			1,784,668.		4,466,779.
	11	Investments - publicly traded securities			106,332.	11	4,400,779.
	12	Investments - other securities. See Part IV, line 1			100,332.	12	
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets			900,978.	14	022 000
	15	Other assets. See Part IV, line 11			9,957,686.	15	922,900. 10,592,175.
	16	Total assets. Add lines 1 through 15 (must equa			3,676,616.	16	
	17	Accounts payable and accrued expenses	3,070,010.	17	2,814,959.		
	18	Grants payable			718,368.	18	412,653.
	19	Deferred revenue			/10,300.	19	412,000.
	20			·····		20	
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to any current or form					
iliti		trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes			700 010	22	
-	23	Secured mortgages and notes payable to unrela			720,912.	23	
	24	Unsecured notes and loans payable to unrelated	-	F		24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24).	Complete Part X	00 105		40.005
		of Schedule D		······  -	90,105.	25	<u>42,085.</u> 3,269,697.
	26	Total liabilities. Add lines 17 through 25			5,206,001.	26	3,269,697.
ŝ		Organizations that follow FASB ASC 958, che	ck here	• X			
čě		and complete lines 27, 28, 32, and 33.			4 206 060		
alan	27	Net assets without donor restrictions		······  -	4,306,868.	27	7,027,260. 295,218.
B	28			······	444,817.	28	295,218.
n		Organizations that do not follow FASB ASC 9	58, che	ck here			
Ē		and complete lines 29 through 33.					
s S	29	Capital stock or trust principal, or current funds				29	
sei	30	Paid-in or capital surplus, or land, building, or eq	uipmer	t fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc				31	
Nei	32	Total net assets or fund balances			4,751,685.	32	7,322,478. 10,592,175.
-	33	Total liabilities and net assets/fund balances			9,957,686.	33	10.592.175.

Form 990 (2023)
Part X Balance Sheet

Think Small

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

10,592,175.

Form **990** (2023)

Form	1 990 (2023) Think Small	41-	1260581	Pa	<sub>ge</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	41,942		
2	Total expenses (must equal Part IX, column (A), line 25)	2	39,507		
3	Revenue less expenses. Subtract line 2 from line 1	3	2,435		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,751		
5	Net unrealized gains (losses) on investments	5	135	5,5	61.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	7,322	2,4	78.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		·····		X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?			X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3a</u>	Х	──
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	<u>X</u>	L

Form **990** (2023)

SCHEDULE A	١
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(Form 990)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt	charita	ble trust
Attach to Form 990 o	r Form	990-EZ.

2023	
Open to Public	

OMB No. 1545-0047

		f the Treasury nue Service			Attach to Form 990 or Fo /Form990 for instruction			ormation.		Open to Public Inspection
Nam	e of t	the organizati	on						Employer	identification numbe
				k Small						1-1260581
Pa	rt I	Reason	for Public (	Charity Status.	(All organizations must o	complete t	nis part.) S	ee instructior	IS.	
The	organ	ization is not a	a private found	ation because it is:	(For lines 1 through 12, c	heck only	one box.)			
1		A church, co	nvention of ch	urches, or association	on of churches described	d in <b>sectio</b>	on 170(b)( <sup>-</sup>	1)(A)(i).		
2		A school des	cribed in <b>sect</b> i	ion 170(b)(1)(A)(ii).	(Attach Schedule E (Forr	n 990).)				
3		A hospital or	a cooperative	hospital service org	anization described in s	ection 170	<b>)(b)(1)(A)(i</b>	ii).		
4			•	ation operated in co	onjunction with a hospital	described	l in sectio	on 170(b)(1)(A	.)(iii). Enter	the hospital's name,
		city, and stat								
5					ollege or university owned	d or operat	ed by a go	overnmental u	nit describe	ed in
				Complete Part II.)						
6				-	mental unit described in					
7	X				antial part of its support f	rom a gove	ernmental	unit or from t	ne general j	oublic described in
-				omplete Part II.)						
8		-			)(1)(A)(vi). (Complete Par	-			1	
9					l in section 170(b)(1)(A)					
			or a non-land-g	grant college of agric	culture (see instructions).	Enter the	name, city	, and state of	the college	or
10		university:	on that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from o	ontribution	as momborst	in foos and	d gross receipts from
10		-		• • • •	ct to certain exceptions;				-	•
					e (less section 511 tax) fro					
				mplete Part III.)			5505 2040		gamzation e	
11					sively to test for public sa	fetv See	section 50	0.9(a)(4)		
12	$\square$	-	-		sively for the benefit of, to	-			rrv out the	purposes of one or
					ed in section 509(a)(1)					
					of supporting organization					
а		-	•	• •	supervised, or controlled				-	giving
					egularly appoint or elect a	•	-			
			-	complete Part IV, S						
b		<b>-</b>			d or controlled in connec	tion with it	s supporte	ed organizatio	n(s), by hav	ving
		control or r	nanagement o	of the supporting org	anization vested in the s	ame perso	ns that co	ntrol or mana	ge the supp	ported
		organizatio	n(s). <b>You mus</b>	t complete Part IV,	Sections A and C.					
с		Type III fur	nctionally inte	grated. A supportir	ng organization operated	in connec	tion with, a	and functiona	lly integrate	ed with,
		its support	ed organizatio	n(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.		
d		Type III no	n-functionally	/ integrated. A sup	porting organization ope	rated in co	nnection v	vith its suppo	rted organiz	zation(s)
		that is not f	functionally int	egrated. The organi	zation generally must sat	tisfy a distr	ibution red	quirement and	an attentiv	/eness
	_	requiremen	nt (see instructi	ions). <b>You must co</b>	mplete Part IV, Section	s A and D,	and Part	V.		
е			•		written determination fro			Type I, Type	II, Type III	
		functionally	/ integrated, or	r Type III non-functio	onally integrated supporti	ng organiz	ation.			
f			of supported o	•						
g		(i) Name of supp	0	n about the support (ii) EIN	ed organization(s). (iii) Type of organization	(iv) Is the org	anization listed	(v) Amount o	f monetary	(vi) Amount of other
	``	organization		(-)	(described on lines 1-10		ing document?	support (see i		support (see instructions
					above (see instructions))	Yes				
Tota	l									

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## 14370326 759492 48662

# Schedule A (Form 990) 2023 Think Small 41-1260 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.)

Sec	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	27014489.	24154380.	28232504.	35477394.	39911594.	154790361
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
4		27014489.	24154380.	28232504.	35477394.	39911594.	154790361
	The portion of total contributions						
Ũ	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)						1 - 4 7 0 0 2 6 1
	Public support. Subtract line 5 from line 4.						154790361
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	27014489.	24154380.	28232504.	354//394.	39911594.	154/90361
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources $\dots$	70,574.	130,578.	177,036.	218,629.	224,902.	821,719.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	175,756.	97,375.	76,280.	27,552.	2,426.	379,389.
11	Total support. Add lines 7 through 10						155991469
12	Gross receipts from related activities,	etc. (see instructio	ons)			12 10	,044,816.
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)	
	organization, check this box and stop	o here					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2023 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	99.23 <u>%</u>
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	<u>99.29 %</u>
	33 1/3% support test - 2023. If the o					ore, check this bo	x and
	stop here. The organization qualifies as a publicly supported organization						
b	<b>b 33 1/3% support test - 2022.</b> 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						
	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	-		• • • •			
	more, and if the organization meets th	-					
	organization meets the facts-and-circi						
18	Private foundation. If the organization		•				s

Schedule A (Form 990) 2023

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Schedule A			Think				
Part III	Support	Schedule	for Organiza	ations De	scribed in	Section	509(a)(2)

Think Small

(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.)

Sec	ction A. Public Support					_	
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disgualified persons						
	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						
С	Add lines 7a and 7b						
8 Sec	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organi	zation,
	check this box and stop here		•				
	ction C. Computation of Publi					<u> </u>	
	Public support percentage for 2023 (I			column (f))		15	%
	Public support percentage from 2022		1			16	%
	ction D. Computation of Inves						
	Investment income percentage for 20		B			17	%
	Investment income percentage from			an line 14 and lin		18	%
19a	<b>33 1/3% support tests - 2023.</b> If the	-					
1-	more than 33 1/3%, check this box ar	-					
b	<b>33 1/3% support tests - 2022.</b> If the						
00	line 18 is not more than 33 1/3%, che					•	ion
	Private foundation. If the organization	n ala not check a	box on line 14, 19	va, or 190, check t	nis box and see in		
33202	23 12-21-23		1.0	-		Schedu	ule A (Form 990) 2023

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

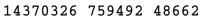
Yes No

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

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



	(Form 990) 2023		Small
Part IV	Supporting Organ	nizations <sub>(co</sub>	ontinued)

1

2

Yes No

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	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 Part VI how the supported organization(s)
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported
	organization, describe how the powers to appoint and/or remove 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.
2	Did the organization operate for the benefit of any supported organization other than the supported
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization

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Section C	. Type II	Supporting	Organi	zations	

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 **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)

Section D.	All Type III	Supporting	Organizations				

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

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

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the ye	ear (see instructions)
-	Oneon the box next to the method that the organization used to satisfy the integral r art rest during the ye	<i>far (</i> <b>eee</b>

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

<b>c</b> [		The organization supported a governmental entity.	Describe in Part VI how	you supported a governm	nental entity (see instruction <u>s).</u>
------------	--	---	-------------------------	-------------------------	---

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on 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* Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "*Yes*" or "*No*" *provide details in* **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

 Yes
 No

 2a
 ...

 2a
 ...

 2b
 ...

 3a
 ...

 3b
 ...

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	ov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions
All other Type III non-functionally integrated supporting organizations must	st complete S	Sections A through E.	1
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in <b>Part VI</b> ):			
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 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 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 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	ally integrated	d Type III supporting orga	nization (see

instructions).

Schedule A (Form 990) 2023

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6	Other distributions (describe in Part VI). See instructions.	6			
7	Total annual distributions. Add lines 1 through 6.		7		
8	Distributions to attentive supported organizations to which th				
	(provide details in Part VI). See instructions.		8		
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	IS	(iii) Distributable Amount for 2023
_1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
b	Excess from 2020				
с	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

1

2

3 4

5

**Current Year** 

Administrative expenses paid to accomplish exempt purposes of supported organizations

**1** Amounts paid to supported organizations to accomplish exempt purposes

organizations, in excess of income from activity

4 Amounts paid to acquire exempt-use assets

2 Amounts paid to perform activity that directly furthers exempt purposes of supported

5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)

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

Schedule A (Form 990) 2023

Section D - Distributions

3

Schedule A	(Form 990) 2023	Think	Small			41-1260581	Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, Section D, lines 5, 6, and	2, 3b, 3c, 4t ines 2 and 3	o, 4c, 5a, 6, 9a, 9b, 9c ; Part IV, Section E, lir	c, 11a, 11b, and 11c; I nes 1c, 2a, 2b, 3a, and	Part IV, Section B, lines 1 d 3b; Part V, line 1; Part V	17b; Part III, line 12; and 2; Part IV, Section , Section B, line 1e; Pa	C,
	(See instructions.)						
332028 12-21-2	3			21		Schedule A (Form 9	90) 2023

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### **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

# 2023

Employer identification number

41-1260581

Name of the organization	
--------------------------	--

Organization type (check one):

Schedule B

Department of the Treasury

Internal Revenue Service

(Form 990)

Think Small	1
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Filers of:	Section:
Form 990 or 990-EZ	$\fbox{3}$ 501(c)( 3) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> 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**

X 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), 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 for an *exclusively* set in the set of t

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

	B (Form 990) (2023)		Emple	Page Z
Name of o	rganization		Empio	yer identification number
<u>Think</u>	Small		41	-1260581
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	าร	(d) Type of contribution
1		\$3,100,0	00.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	าร	(d) Type of contribution
2		\$ <u>7,484,5</u>	<u>24.</u>	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior		(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	าร	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	าร	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	าร	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

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2

	B (Form 990) (2023)		Page 3
Name of o	rganization		Employer identification number
Think	Small		41-1260581
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed	1.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	

14370326 759492 48662

48662\_\_1

Name of o	rganization			Employe	r identification number
Fhink	Small			41-3	1260581
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns ( completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additiona	a) through (e) and the following lind charitable, etc., contributions of \$1,00	e entry. For ora	;)(7), (8), or (10) that total mor	e than \$1,000 for the year
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of	how gift is held
-	Transferee's name, address,	(e) Transfer o		ationship of transferor to	transforce
-			ne		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of	how gift is held
-		(e) Transfer o			
-	Transferee's name, address,		<u>ne</u>	ationship of transferor to	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of	how gift is held
-		(e) Transfer o	of gift		
-	Transferee's name, address,	and ZIP + 4	Re	ationship of transferor to	transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of	how gift is held
		(e) Transfer o	of gift		
-	Transferee's name, address,	and ZIP + 4	Re	ationship of transferor to	transferee
23454 12-26	5-23			S	chedule B (Form 990) (202

25 2023.05070 THINK SMALL

SCHEDULE	С
(Form 990)	

Department of the Treasury

Internal Revenue Service

# Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

• Section 527 organizations: Complete Part I-A only.

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

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

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

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

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

Nan	ne of organization				Emplo	oyer identification number
	Think S	mall				41-1260581
Pa	rt I-A Complete if the org	anization is exempt und	er section 501(c) o	or is a section 52	27 org	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures				
Pa	rt I-B Complete if the org	anization is exempt und	er section 501(c)(3	3).		
2 3 4a	Enter the amount of any excise tax Enter the amount of any excise tax If the organization incurred a section Was a correction made?	incurred by organization manage n 4955 tax, did it file Form 4720	ers under section 4955 for this year?		\$ 	Yes No Yes No
Pa	rt I-C Complete if the org	anization is exempt und	er section 501(c),	except section 5	501(c)	(3).
1	Enter the amount directly expended	by the filing organization for sec	ction 527 exempt functi	ion activities	\$	
2	Enter the amount of the filing organ	ization's funds contributed to oth	ner organizations for se	ction 527		
	exempt function activities				\$	
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here a	nd on Form 1120-POL,			
	line 17b				\$	
	Did the filing organization file Form					
5	Enter the names, addresses, and er made payments. For each organiza contributions received that were pro- political action committee (PAC). If	tion listed, enter the amount pair omptly and directly delivered to a	from the filing organization organization for the filing organization of the filing organization of the filing of	ation's funds. Also en Inization, such as a se	iter the	amount of political
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid t filing organizatio funds. If none, ent	n's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2023

OMB No. 1545-0047

Open to Public

Inspection

23

LHA 332041 11-06-23

Schedule C (Form 990) 2023	Think Small			41-1	260581 Page 2
Part II-A Complete if the org	anization is exen	npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under
section 501(h)).					
A Check if the filing organiza	ation belongs to an affil	iated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and sha	re of excess lobbying e	expenditures).			
B Check if the filing organiza	ation checked box A an	d "limited control" pro	visions apply.	I	
Limi	ts on Lobbying Exper	nditures		(a) Filing	(b) Affiliated group
	ditures" means amou			organization's totals	totals
<b>1a</b> Total lobbying expenditures to influence				133,619.	
<b>b</b> Total lobbying expenditures to influ				76,537.	
c Total lobbying expenditures (add li				210,156.	
d Other exempt purpose expenditure				37,839,284.	
e Total exempt purpose expenditure				38,049,440.	
f Lobbying nontaxable amount. Ente				1,000,000.	
If the amount on line 1e, column (a) o		bying nontaxable amo	ount is:		
not over \$500,000,		he amount on line 1e.	\$500.000		
over \$500,000 but not over \$1,000		0 plus 15% of the exce			
over \$1,000,000 but not over \$1,5		0 plus 10% of the exce			
over \$1,500,000 but not over \$17,		0 plus 5% of the exces	s over \$1,500,000.		
over \$17,000,000, g Grassroots nontaxable amount (en	\$1,000,0	JUU.		250,000.	
h Subtract line 1g from line 1a. If zer	,			0.	
i Subtract line 1f from line 1c. If zero	· · · · · · · · · · · · · · · · · · ·			0.	
j If there is an amount other than ze		ine 1i, did the organiza			
reporting section 4911 tax for this				Г	Yes No
		raging Period Under		L	
(Some organizations t				of the five columns be	low.
	See the separa	ate instructions for lin	es 2a through 2f.)		
	Lobbying Exper	ditures During 4-Yea	r Averaging Period		
Colondariusari					
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) Total
2a 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	84,020.	137,849.	50,917.	210,156.	482,942.
					1 000 000
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount					1 500 000
(150% of line 2d, column (e))					1,500,000.
	81 020	137,314.	49,979.	122 610	101 020
f Grassroots lobbying expenditures	84,020.		49,919.	133,619.	404,932.

Schedule C (Form 990) 2023

332042 11-06-23

Think Small

# 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 e	r each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the lobbying activity.		Yes	No	Amo	ount	
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?					
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	Media advertisements?					
d	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5),	or sec	tion		
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	e prior year?	3	<b>t</b> '		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."				3, is	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political					
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
	Carryover from last year		2b			
	Total		2c			
3			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical				
	expenditures next year?		4			
_5	Taxable amount of lobbying and political expenditures. See instructions		5			
Par	t IV Supplemental Information					
Provi	de 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. I	ines 1 a	nd 2 (see		

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2023

332043 11-06-23

		Supplement	al Einancial	Statomonte		OMB No. 1	545-0047
SCHEDULE D (Form 990) Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,						204	າງ
(Forr	n 990)	Part IV, line 6, 7, 8, 9, 10				<b>ZU</b>	23
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						Open to Inspect	
	e of the organizati	on				nployer identificatio	n number
_		Think Small				41-12605	
Pa		ations Maintaining Donor Advise		er Similar Funds or	Accou	nts. Complete if the	ne
	organizatio	n answered "Yes" on Form 990, Part IV, lin			(h) [	and other acces	unto.
			(a) Donor ac	ivised tunds	(D) Fu	nds and other accou	ints
1		nd of year					
2		f contributions to (during year)					
3		f grants from (during year)					
4 5		t end of year on inform all donors and donor advisors in		a hald in donar advised fr	Indo		
5	-	on's property, subject to the organization's	-			Yes	No
6		on inform all grantees, donors, and donor a					
Ŭ	•	poses and not for the benefit of the donor of	•	•			
	impermissible priv		,	, , ,	0		No
Pa		ation Easements. Complete if the or					
1		servation easements held by the organizati			,		
		n of land for public use (for example, recrea		<u> </u>	storically	y important land area	a
	Protection o	of natural habitat		Preservation of a co	ertified h	istoric structure	
	Preservation	n of open space					
2	Complete lines 2a	through 2d if the organization held a quality	fied conservation cor	tribution in the form of a	conserva	ation easement on th	ne last
	day of the tax year	r.				Held at the End of th	e Tax Year
а	Total number of co	onservation easements			2a		
b	Total acreage rest	ricted by conservation easements			2b		
с	Number of conser	vation easements on a certified historic str	ucture included on lir	ne 2a	2c		
d		vation easements included on line 2c acqu					
	on a historic struc	ture listed in the National Register			2d		
3	Number of conser	vation easements modified, transferred, rel	eased, extinguished,	or terminated by the org	anizatior	n during the tax	
	year						
4		where property subject to conservation eas					
5	-	tion have a written policy regarding the per					<b>—</b>
•	,	orcement of the conservation easements it					No
6	Starr and voluntee	r hours devoted to monitoring, inspecting,	nandling of violations	s, and enforcing conserva	tion eas	sements during the y	ear
7	Amount of ovnone		lling of violations on	d onforcing concentration		ata during the year	
7	Amount of expens	ses incurred in monitoring, inspecting, hand	ining of violations, and	d enforcing conservation	easemei	nis during the year	
8	Does each conser	 vation easement reported on line 2d above	satisfy the requirem	ents of section 170(h)(4)(f	3) <i>(</i> i)		
•		)(4)(B)(ii)?	•			Yes	No
9		be how the organization reports conservati					
		d include, if applicable, the text of the footr					
	organization's acc	ounting for conservation easements.	-				
Pa	t III Organiza	ations Maintaining Collections of	Art, Historical	Freasures, or Other	Simila	ar Assets.	
	Complete i	f the organization answered "Yes" on Form	990, Part IV, line 8.				
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its	revenue statement and b	alance s	sheet works	
	of art, historical tre	easures, or other similar assets held for put	olic exhibition, educa	tion, or research in furthe	rance of	public	
	service, provide in	Part XIII the text of the footnote to its finan	ncial statements that	describes these items.			
b	-	elected, as permitted under FASB ASC 95					
		sures, or other similar assets held for public	exhibition, educatio	n, or research in furtherar	ice of pu	ublic service,	
	-	ing amounts relating to these items.					
		ded on Form 990, Part VIII, line 1				\$	
-		ed in Form 990, Part X				. \$	
2		received or held works of art, historical tre			n, provid	le	
_	•	unts required to be reported under FASB A	SC 958 relating to th	ese items:		¢	

a Revenue included on Form 990, Part VIII, line 1
 <u>b</u> Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-28-23 Schedule D (Form 990) 2023

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	dule D (Form 990) 2023 Think S							41-12	60581	- Pa	age <b>2</b>
Par	t III Organizations Maintaining C	ollections of Ar	t, Histe	orical Tre	asures, o	r Othei	r Similai	Assets	(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	following that	: make si	gnificant u	ise of its			
	collection items (check all that apply).										
а	Public exhibition	c			hange progra						
b	Scholarly research	e		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explair	n how th	ey further th	ne organizatio	on's exen	npt purpo	se in Part	XIII.		
5	During the year, did the organization solicit of								-		-
D.	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran		te if the	organizatior	n answered "'	Yes" on I	Form 990,	Part IV, li	ne 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custodi							_	7		1
-	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing t	able:					Amount		
									Amount		
	Beginning balance										
	Additions during the year										
-	Distributions during the year										
f	Ending balance Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII.						ity?	∟	165		]
Par							0.				1
		(a) Current year		rior year	(c) Two year		(d) Three y	ears back	(e) Four	years I	back
1a	Beginning of year balance			y			<u> </u>			<u> </u>	
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr		e (line 1g	g, column (a)	)) held as:						
а	Board designated or quasi-endowment	-	_%								
b	Permanent endowment	%									
с	Term endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organiza	ation tha	t are held ar	nd administer	ed for th	e		_		
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization								3b		
4	Describe in Part XIII the intended uses of the		wment f	unds.							
Par	t VI Land, Buildings, and Equipm					Dent V	l'a a 10				
	Complete if the organization answere										
	Description of property	(a) Cost or o basis (investr		• •	or other (other)		ccumulate preciation	ed	(d) Booł	value	;
<b>1</b> a	Land				5,000.				205	5,00	0.
	Buildings				4,275.	1,:	194,2	75.	-		0.
	Leasehold improvements			-	4,117.		545,69		88	3,42	
	Equipment				6,472.		284,03			2,46	
	Other										
	. Add lines 1a through 1e. (Column (d) must e		<u>X. line 1</u>	0c. column	(B))	<u></u>			575	5,88	35.

Schedule D (Form 990) 2023

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Complete if the organization answered "Yes" of	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.			
	on Form 000 Dort IV/ line	11a Cas Form 000 Dart V line 12	
Complete if the organization answered "Yes" of			- <b>6</b>
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" of	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 co	sts net		849,869.
(3) Operating right-of-use ass			66,912.
			00,912.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	<u>(B))</u>		922,900.
Part X Other Liabilities			
Complete if the organization answered "Yes" of	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) Operating lease liability			42,085.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
			42,085.
Total. (Column (b) must equal Form 990, Part X, line 25, col.			

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

Schedule D (Form 990) 2023

332053 09-28-23

Sche	dule D (Form 990) 2023 Think Small			41-	1260581 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial State	ments With I	Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total revenue, gains, and other support per audited financial statements			1	42,086,874.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	135,561.		
b	Donated services and use of facilities	2b	8,400.		
с	Recoveries of prior year grants	2c			
d					
е	Add lines 2a through 2d			2e	143,961.
3	Subtract line 2e from line 1			3	41,942,913.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	41,942,913.
Pa	rt XII Reconciliation of Expenses per Audited Financial State		Expenses per F	Retur	n
	Complete if the organization answered "Yes" on Form 990, Part IV, line				
1	Total expenses and losses per audited financial statements			1	39,516,081.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	8,400.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	8,400.
3	Subtract line <b>2e</b> from line <b>1</b>			3	39,507,681.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			_
С	Add lines <b>4a</b> and <b>4b</b>			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	39,507,681.
Pa	rt 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.

332054 09-28-23

14370326 759492 48662

SCHEDULE I			rants and Oth					F	OMB No. 15	545-0047
(Form 990)			vernments, an ete if the organization						202	23
Department of the Treasury Internal Revenue Service		• • · · · ·	-	Attach to Form .gov/Form990 for	n 990.				Open to Inspec	
Name of the organization	Think Sma	11						Employer id	entificatio	
Part I General Inform	nation on Grants a							1		
	d the grants or assis	stance?				for the grants or assis		ion	X Yes	🗌 No
2 Describe in Part IV th										
		-	ations and Domestic be duplicated if addition		• •	anization answered "Y	es" on Form 990, Par	t IV, line 21, fo	or any	
<b>1 (a)</b> Name and addres or governr	s of organization	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance		urpose of g assistance	
PARTNERSHIP ACADEMY										
6500 NICOLLET AVE S										
RICHFIELD, MN 55423		01-0701608	501(c)3	7,868.	0.			Scholarshi	lps	
JAIN ENTERPRISES 10210 Lancaster Lane	North									
Maple Grove, MN 55369	9	04-3775230		65,620.	0.			Scholarshi	ips	
ROBIN E RILEY 3617 3RD AVE S MINNEAPOLIS, MN 55409	9	05-0531261		6,152.	0.			Scholarshi	ips	
SARAH L HOLLIDAY 4026 Bryant Avenue No Minneapolis, MN 55412		13-4233185		28,055.	0.			Grants and	l Scholau	rshins
	6	15 4255105		20,033.				Granes and		вшрв
TIFFANY COLETTE ROBER 1935 Parkland Court	RTS	14 1006027		65.250	0			Gebelenshi		
ST. PAUL, MN 55119		14-1996027		65,350.	0.			Scholarshi	LDS	
MES AMIS FRENCH SCHOO 1430 MEADOW CT	DL LLC									
CHASKA, MN 55318		20-2554487		36,311.	0.			Scholarshi	lps	
2 Enter total number of	section 501(c)(3) a	nd government org	anizations listed in the	e line 1 table						94.
3 Enter total number of	other organizations	s listed in the line 1	table							147.

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

#### Think Small

Schedule I (Form 990) Think Sma				<b>1</b> (0 - 1			1-1260581 Page
Part II         Continuation of Grants and Other           (a) Name and address of organization or government	(b) EIN	(c) IRC section (c) if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mis Amigos Spanish Immersion, LLC 5411 CIRCLE DOWN							
GOLDEN VALLEY, MN 55416	20-3675365		102,313.	0.			Grants and Scholarships
Audrey Neal 1038 Blair Avenue							
Saint Paul, MN 55104	20-4214685		19,180.	0.			Grants and Scholarships
Renew Heights LLC 7879 SOMERSET CT							
WOODBURY, MN 55125	20-4487742		7,435.	0.			Grants and Scholarships
BABYS SPACE A PLACE TO GROW 2438 18th Avenue South							
Minneapolis, MN 55404	20-4502788	501(c)3	350,383.	0.			Scholarships
SPIRITUAL LIFE BIBLE COLLEGE 6865 SHINGLE CREEK PARKWAY BROOKLYN CENTER, MN 55430	20-5085101	501(c)3	27,687.	0.			Scholarships
JRP Childrens Services, Inc Maple Grove - 6975 Wedgwood Road							
North - Maple Grove, MN 55311	20-5138005		76,471.	0.			Grants and Scholarships
COMMUNITY CHILD CARE CENTER, INC. 1250 Fifield AVE							
St. Paul, MN 55108	23-7392142	501(c)3	70,679.	0.			Grant
WuchMac Distributing Inc 20046 Hoya Court							
Lakeville, MN 55044	26-0543815		7,071.	0.			Scholarships
Ladybug No. 2, LLC 859 Vista Boulevard							
Waconia, MD 55387	26-0615910		6,845.	Ο.			Grants and Scholarships

(a) Name and address of		(c) IRC section		(e) Amount of (f) Method of		(g) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
Allstar Childcare Center							
980 10th St NE							
Milaca, MN 56353	26-1306942		10,684.	0.			Scholarships
P&C Business Enterprises Inc							
5000 W Broadway							
Minneapolis, MN 55429	26-1425248		11,536.	0.			Scholarships
The Crayon Box							
- 9554 Foley Boulevard							
Coon Rapids, MN 55433	26-1698472		25,672.	0.			Scholarships
The Crayon Box Child Care Center							
7751 E River Road							
	26 1609524		11 004	0			Cahalanahina
Fridley, MN 55432	26-1698534		11,804.	0.			Scholarships
Stella Maris Academy							
4321 Allendale Avenue							
Duluth, MN 55803	26-2609501		5,426.	0.			Scholarships
Casa de Corazon Inc - Rochester							
970 34th Avenue Northwest							
Rochester, MN 55901	26-2862666		40,158.	0.			Grant
SCHOOL READINESS LEARNING ACADEMY							
1221 7th Avenue North							
Minneapolis, MN 55411	26-3245237		77,886.	0.			Grants and Scholarships
	10 011010,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	••			
IKRAM CHILD CARE CENTER							
3055 Old Highway 8 Ste 110							
Minneapolis, MN 55418	26-3563921		48,222.	0.			Grants and Scholarships
Lollipop Kids Daycare							
20202 Harbor Heights Road							
Grand Rapids, MN 55744	26-3663487		5,096.	0.			Grant

Schedule I (Form 990)	Think	Small
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Schedule I (Form 990) TILLIIK SINA							L-1260561 Page
Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sche	edule I (Form 990), Pa	ırt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APPLE ACADEMY LEARNING CENTER							
1845 MAIN ST							
CENTERVILLE, MN 55038	26-3694765		56,312.	0.			Grants and Scholarships
Creative Kids Academy Minnetonka							
15200 Wayzata Boulevard							
Wayzata, MN 55391	26-4136621		107,246.	٥.			Grants and Scholarships
MACHUPICHU 7 LLC							
1601 NICOLLET AVE							
MINNEAPOLIS, MN 55403	27-0524684		74,067.	0.			Grants and Scholarships
OPEN ARMS EDUCATION & CHILD CARE							
CENTER - 3355 Hiawatha Avenue -							
Minneapolis, MN 55406	27-1123534		53,059.	0.			Scholarships
MAYFLOWER EARLY CHILDHOOD CENTER							
106 EAST DIAMOND LAKE RD	27 1542720	$E_{01}(a)$	70 100	0.			Cabolonghing
MINNEAPOLIS, MN 55419	27-1543720	501(0)5	72,183.	0.			Scholarships
CIRCULO DE AMIGOS CHILD CARE							
CENTER LLC - 2830 CEDAR AVE S -							
MINNEAPOLIS, MN 55407	27-2100603		5,669.	0.			Grants and Scholarships
WILLENDING LENDNING GENEED IT							
MILLENNIUM LEARNING CENTER II 1390 Paul Parkway Northeast							
	27-2293263		12 564	٥.			Cranta and Cabalarahing
Blaine, VA 55434	27-2293203		13,564.	0.			Grants and Scholarships
SMILING FACES ACADEMY							
7217 W Broadway Avenue							
Minneapolis, MN 55428	27-2399875		104,574.	0.			Scholarships
HOOYO CHILD CARE							
3600 Nicollet Ave S							
Minneapolis, MN 55409	27-5560668		66,940.	0.			Scholarships
-			, ,		1	1	1

Schedule I (Form 990)	Think	Small
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Schedule I (Form 990) TILLIIK SINA.	11					4	
Part II Continuation of Grants and Other A	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEANETTE THAO							
731 MAGNOLIA AVE E							
ST PAUL, MN 55106	30-0498558		61,527.	0.			Grants and Scholarships
TODAYS LIFE BROOKLYN PARK LLC							
9995 XENIA AVE N							
BROOKLYN PARK, MN 55443	33-0997142		173,436.	0.			Scholarships
JEAN LYLE CHILDRENS CENTER 130 North Howell Street							
Saint Paul, MN 55104	36-3360364		16,021.	0.			Grants and Scholarships
Urban Ventures Leadership Foundation - 2924 4th Avenue South							
- Minneapolis, MN 55408	36-3558710	501(c)3	49,293.	0.			Scholarships
TUTOR TIME LEARNING CENTER LLC 32209 Collection Center Drive Chicago, IL 60693	36-4500741		255,051.	0.			Scholarships
Rise N Shine Child Care Center 4749 HIAWATHA AVE S							
MINNEAPOLIS, MN 55406	36-4709724		36,854.	0.			Scholarships
Shirell's Child Care LLC 629 E 84th St							
Bloomington, MN 55420	36-4883920		5,472.	0.			Grants and Scholarships
3 RS EARLY CHILDHOOD LEARNING CENTER - 4900 85TH AVE N -							
BROOKLYN PARK, MN 55443	37-1580191	501(c)3	249,521.	0.			Scholarships
Mustang Munchkins Childcare Center 210 Oak Street							
Mora, MN 55051	37-1942277		6,723.	Ο.			Scholarships

Schedule I (Form 990) Think Sma				(O)-			11-1260581 Page
Part II         Continuation of Grants and Other A           (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(Scher (e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HALLIE Q BROWN COMMUNITY CENTER INC - 270 N KENT ST - ST PAUL, MN 55102	41-0693846	501(c)3	60,422.	0.			Grants and Scholarships
THE FAMILY PARTNERSHIP 414 EIGHTH ST S 4INNEAPOLIS, MN 55404	41-0693858	501(c)3	516,857.	0.			Grants and Scholarships
AMHERST H WILDER FOUNDATION CFS Billing 451 LEXINGTON PKWY N ST PAUL, MN 55104	41-0693889	501(c)3	62,097.	0.			Scholarships
WCA OF MINNEAPOLIS .130 NICOLET MALL MINNEAPOLIS, MN 55403	41-0693891	501(c)3	458,432.	0.			Grants and Scholarships
Richfield Evangelical Lutheran Church – 8 West 60th Street – Minneapolis, MN 55419	41-0693948	501(c)3	61,989.	0.			Scholarships
SALVATION ARMY NORTHERN DIVISION 101 W 7th St Saint Paul, MN 55102	41-0698597	501(c)3	14,434.	0.			Scholarships
Church of the Ascension 723 North Bryant Avenue Minneapolis, MN 55411	41-0705767	501(c)3	7,700.	0.			Scholarships
St. Anthony Park Community Nursery School – 2200 West Hillside Avenue - Saint Paul, MN 55108	41-0705843	501(c)3	13,833.	0.			Grants and Scholarships
JNION GOSPEL MISSION ASSOCIATION DF ST PAUL – 376 Western Avenue North – Saint Paul, MN 55103	41-0705847	501(c)3	56,598.	0.			Grants and Scholarships

#### Think Small Schedule I (Form 990)

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Part II Continuation of Grants and Other					-uuie i (Fuitti 330), Fa		
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PHYLLIS WHEATLEY COMMUNITY CENTER							
1301 North 10th Avenue							
Minneapolis, MN 55411	41-0706132	501(c)3	334,661.	0.			Scholarships
CHURCH OF ST FRANCIS DE SALES							
749 JUNO AVE							
ST PAUL, MN 55102	41-0721706	501(c)3	34,251.	0.			Scholarships
St. Raphael Catholic Church and							
School - 7301 Bass Lake Road -							
Crystal, MN 55428	41-0729961	501(c)3	8,884.	0.			Scholarships
Nativity of the Blessed Virgin							
9900 Lyndale Avenue South							
Bloomington, MN 55420	41-0735359	501(c)3	7,724.	0.			Grant
St. Olaf Lutheran Church							
306 2nd Street Northwest							
Austin, MN 55912	41-0764075	501(c)3	8,980.	0.			Scholarships
CHURCH OF ST JEROME							
384 E ROSELAWN AVE	44 000000		110.005				
MAPLEWOOD, MN 55117	41-0773779	501(c)3	118,905.	0.			Scholarships
FRASER							
PO Box 856719							
Minneapolis, MN 55485	41-0781858	501(c)3	52,715.	0.			Grants and Scholarships
EASTERN HEIGHTS LUTHERAN CHURCH							
616 RUTH ST							
ST PAUL, MN 55119	41-0823000	501(c)3	51,385.	0.			Scholarships
			51,505.	0.			Perotatontbo
Rose of Sharon Lutheran Church							
6875 Jamaica Avenue South							
Cottage Grove, MN 55016	41-0838036	501(c)3	7,934.	Ο.			Scholarships

Schedule I (	Form 990	, Tł	ıink	: Small
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Schedule   (Form 990) TILLIIK SIIIa. Part II Continuation of Grants and Other A		mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990). Pa		1-1200581 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHURCH OF ST PETER OF NORTH ST.							
PAUL – 2600 N MARGARET ST – NORTH							
ST PAUL, MN 55109	41-0838644	501(c)3	15,058.	0.			Grants and Scholarships
WOODDALE CHURCH							
6630 SHADY OAK RD							
EDEN PRAIRIE, MN 55344	41-0844378	501(c)3	50,640.	0.			Grants and Scholarships
ST ALPHONSUS PARISH SCHOOL							
7031 HALIFAX AVE N							
BROOKLYN CENTER, MN 55429	41-0846441	501(c)3	18,036.	0.			Scholarships
BROOKEIN CENIER, MN 55425	11 0010111	501(0)5	10,030.	••			
SPECIAL SCHOOL DIST 1 -							
MINNEAPOLIS - 3017 East 31st							
Street - Minneapolis, MN 55406	41-0851980	501(c)3	55,935.	0.			Grants and Scholarships
	41 0051900	501(0/5		••			
Lutheran Social Service of MN							
2485 Como Avenue							
Saint Paul, MN 55108	41-0872993	501(c)3	21,616.	0.			Scholarships
Same radi, Mi SS100	41 0072555	501(075	21,010.	0.			
ST MATTHEW LUTHERAN CHURCH							
4101 Washington St. NE							
Columbia Heights, MN 55421	41-0875880	501(a)3	16,773.	0.			Grants and Scholarships
COMMUNITY ACTION PARTNERSHIPS	41-0075000	501(075	10,773.	0.			
RAMSEY & WASHINGTON COUNTIES - 450							
S SYNDICATE ST - ST PAUL, MN							
-	41 0002442	E01(-)2	1 099 701	0			a halawahi na
55104	41-0883443	501(0)5	1,088,701.	0.			Scholarships
EXCELSIOR COVENANT PRESCHOOL							
Excelsior Boulevard	41 0004540	E01/->>		_			a - Langhing
Excelsior, MN 55331	41-0884543	DUT(C)2	6,550.	0.			Scholarships
Christ Memorial Lutheran Church							
13501 Sunset Trail							
	41 0010147	F01(a)2	12.060				Cabolomahina
Minneapolis, MN 55441	41-0912147	DOT(C)3	13,060.	0.			Scholarships

Schedule I (Form 99	) Think	Small
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Part II Continuation of Grants and Other	Assistance to Dou	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	irt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PILLSBURY UNITED COMMUNITIES							
3501 CHICAGO AVE S							
MINNEAPOLIS, MN 55407	41-0916478	501(c)3	31,013.	0.			Grants and Scholarships
MISSISSIPPI VALLEY MONTESSORI							
1575 Charlton Street							
West St Paul, MN 55118	41-0917938	501(c)3	28,481.	0.			Scholarships
PARENTS IN COMMUNITY ACTION INC							
700 North Humboldt Avenue							
Minneapolis, MN 55411	41-0956226	501(c)3	1,336,220.	0.			Scholarships
LA CRECHE EARLY CHILDHOOD CENTERS							
1800 OLSON MEMORIAL HWY							
MINNEAPOLIS, MN 55411	41-0958652	501(c)3	726,659.	0.			Grants and Scholarships
SEWARD CHILD CARE							
2323 32ND AVE S							
MINNEAPOLIS, MN 55406	41-1240047	501(c)3	29,927.	0.			Grants and Scholarships
COMO COMMUNITY CHILD CARE							
1024 27th Avenue Southeast							
Minneapolis, MN 55414	41-1250693	501(c)3	32,186.	0.			Scholarships
REDLEAF PRESS							
Lockbox #446079							
Saint Paul, MN 55164	41-1260581	501(c)3	17,868.	0.			Grant
	41 1200301	501(0)5	17,000.				
Perspectives Inc							
3381 Gorham Ave							
St Louis Park, MN 55426	41-1288300	501(c)3	47,121.	0.			Grants and Scholarships
St Andrew Lutheran Church							
13600 Technology Drive							
Eden Prairie, MN 55344	41-1289679	501(c)3	24,438.	0.			Scholarships

Schedule I (Form 990) Think Smal				(Coho			11-1260581 Pag
Part II         Continuation of Grants and Other A           (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(sche (e) Amount of noncash assistance	dule I (Form 990), Pa (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRO TYRONE GUZMAN							
1915 CHICAGO AVE. S.							
MINNEAPOLIS, MN 55404	41-1290349		8,075.	0.			Grants and Scholarships
BROOKDALE CHRISTIAN CENTER DAYCARE							
6030 XERXES AVE N							
BROOKLYN CENTER, MN 55430	41-1298917	501(c)3	33,511.	Ο.			Scholarships
CATHOLIC CHARITIES OF THE			,				
ARCHDIOCESE OF ST PAUL AND							
MINNEAPOLIS - 1000 PLYMOUTH AVE N							
- MINNEAPOLIS, MN 55411	41-1302487	501(c)3	601,289.	Ο.			Scholarships
·							
ESPECIALLY FOR CHILDREN INC							
5223 W 73RD ST							
EDINA, MN 55439	41-1318998		129,169.	0.			Grants and Scholarships
LITTLE VOYAGEURS MONTESSORI SCHOOL							
INC - 825 51ST AVE NE - COLUMBIA							
HEIGHTS, MN 55421	41-1327355	501(c)3	13,699.	0.			Grants and Scholarships
FAMILYWISE SERVICES							
3036 University Avenue Southeast							
Minneapolis, MN 55414	41-1343909	501(c)3	13,904.	0.			Scholarships
CODNED GROVE NOVEEGGODT GOUOOI							
CORNERSTONE MONTESSORI SCHOOL							
1611 AMES AVE	41-1361913	501(a)	67 566	Ο.			Grants and Scholanshire
ST PAUL, MN 55106	41-1301313	JOT ( C ) 3	67,566.	υ.			Grants and Scholarships
CHILDRENS DISCOVERY CHILD CARE AND							
LEARNING INC - 3665 TALMAGE CIR -							
	41-1391058		92,999.	0.			Scholarships
VADNAIS HEIGHTS, MN 55110	41-1391030		52,355.	υ.			Penorarenthe
People Serving People							
614 3rd Street South							
Minneapolis, MN 55415	41-1443148	501(c)3	206,433.	Ο.			Grants and Scholarships

Schedule I (Form 990)	Think	Small
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Part II Continuation of Grants and Other		issue of guinzations				[ [	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> 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		39,501.	0.			Grants and Scholarships
NOAHS ARK CHILD DEVELOPMENT							
CENTERS INC - 4720 Cumberland St.							
– Shoreview, MN 55126	41-1494089		83,253.	0.			Scholarships
Tiny Tots and Little Tykes							
60 East Marie Ave							
West St. Paul, MN 55118	41-1527628		12,000.	Ο.			Scholarships
Room For Growing							
4700 Scandia Trail North							
Forest Lake, MN 55025	41-1543989		70,644.	0.			Grants and Scholarships
KINDERPLATZ INC							
5600 American Blvd W							
Minneapolis, MN 55437	41-1561825		14,389.	0.			Grants and Scholarships
NEW HORIZON CHILD CARE INC							
3405 ANNAPOLIS LN N							
PLYMOUTH, MN 55447	41-1569865		7,550,121.	0.			Grants and Scholarships
ANEW DIMENSION CHILD ENRICHMENT							
CENTER - 1819 MINNEHAHA AVE S -							
MINNEAPOLIS, MN 55404	41-1628289	501(c)3	168,532.	Ο.			Scholarships
CHURCH OF NEW LIFE CHRISTIAN			, ,				
MINISTRIES - 8600 Bloomington							
Avenue South - Bloomington, MN							
55425	41-1658986	501(c)3	59,452.	0.			Grants and Scholarships
Living Word Childcare Center							
3255 Spring Street NE Ste 140							
Minneapolis, MN 55413	41-1662721	501(c)3	54,782.	Ο.			Scholarships

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Schedule I (Form 990) TILLIIK SINA.							L-1200501 Page
Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.) T	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> 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		313,738.	0.			Scholarships
MOIN INCORPORATED							
6301 Penn Avenue South							
Minneapolis, MN 55423	41-1671453		98,170.	0.			Grants and Scholarships
KID ZONE CHILD CARE CENTER							
715 2nd Avenue South							
Hopkins, MN 55343	41-1683532	501(c)3	10,833.	0.			Scholarships
	11 1000001	501(0)5	10,000.				
DEBBIE EVANS							
581 Arrowhead Dr							
Lino Lakes, NC 55014	41-1684161		10,424.	0.			Grants and Scholarships
MINNESOTA STATE COLLEGES &							
UNIVERSITIES - 30 East 7th Street							
- Saint Paul, MN 55101	41-1687554	501(c)3	5,123.	0.			Grants and Scholarships
FAMILY CHILD DEVELOPMENT CENTER							
100 Nathan Ln N							
PLYMOUTH, MN 55441	41-1690793		7,542.	0.			Grants and Scholarships
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
IHM-ST LUKES							
1065 SUMMIT AVE							
ST PAUL, MN 55105	41-1691889		21,964.	0.			Scholarships
PLAYHOUSE CHILD CARE OF MONTICELLO							
INC - 2901 Clearwater Road - St.							
<u>Cloud, MN 56301</u>	41-1732258		35,279.	0.			Scholarships
LINDA RIETZ							
4333 Braddock Trail							
Eagan, MN 55123	41-1735719		5,452.	0.			Grant

#### Think Small Schedule I (Form 990)

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(a) Name and address of organization or government VIDEHI LARSON 6616 RIDGEVIEW DR EDINA, MN 55439 STEP BY STEP MONTESSORI SCHOOL OF	<b>(b)</b> EIN 41-1782075	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
5616 RIDGEVIEW DR EDINA, MN 55439 STEP BY STEP MONTESSORI SCHOOL OF	41-1782075					1	
EDINA, MN 55439 STEP BY STEP MONTESSORI SCHOOL OF	41-1782075						
STEP BY STEP MONTESSORI SCHOOL OF	41-1782075						
			5,790.	0.			Grant
ROOKLYN PARK - 8455 W Broadway -							
Brooklyn Park, MN 55445	41-1784119		6,525.	0.			Grants and Scholarships
JEREMIAH PROGRAM							
729 North Washington Avenue							
Minneapolis, MN 55401	41-1801834	501(c)3	60,395.	Ο.			Grants and Scholarships
ISD NO 2754							
Attn: Jody Rose							
Franklin, MN 55333	41-1811094	501(c)3	6,240.	0.			Scholarships
ATHLOS LEADERSHIP ACADEMY							
10100 NOBLE PKWY N							
BROOKLYN PARK, MN 55443	41-1822009	501(c)3	7,360.	0.			Scholarships
DAY BY DAY CHILD DEVELOPMENT							
CENTER INC - 1565 Cliff Road -							
Sagan, MN 55122	41-1845964		10,167.	Ο.			Grants and Scholarships
- ,			,				
CLOSE TO MY HEART							
1740 VAN DYKE ST							
MAPLEWOOD, MN 55109	41-1847732	501(c)3	124,619.	0.			Scholarships
SUMMIT EARLY LEARNING CENTER							
015 OLSON MEMORIAL HWY							
MINNEAPOLIS, MN 55405	41-1855935		177,626.	0.			Grants and Scholarships
ONI PLATZ							
2808 TAYLOR ST Blaine, MN 55434	41-1870346		5,978.	0.			Grant

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Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.) T	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LL GODS CHILDREN LEARNING CENTER							
1735 Bassett Creek Drive							
Golden Valley, MN 55422	41-1879712	501(c)3	29,396.	Ο.			Scholarships
	11 10,5,11	301(0)3					bonorarbnipb
WORLD AROUND US CHILD CARE							
2290 11TH AVE E							
NORTH ST PAUL, MN 55109	41-1887084		34,597.	Ο.			Scholarships
Apple Lane Community Child Care							
Center - 1900 8th Avenue Northwest							
- Austin, MN 55912	41-1889518	501(c)3	10,322.	0.			Scholarships
AGAPE CHILD DEVELOPMENT CENTER							
2304 Emerson Avenue North							
Minneapolis, MN 55411	41-1914493	501(c)3	58,644.	0.			Scholarships
A THROUGHTER DEVELOPMENT THE							
RAINBOW CHILD DEVELOPMENT INC 605 Como Avenue							
Saint Paul, MN 55103	41-1915967		125,235.	Ο.			Scholarships
Same Faur, MN 55105	41 1913907		125,255.	0.			
HOLY TRINITY LUTHERAN CHURCH							
4240 GETTYSBURG AVE N							
NEW HOPE, OR 55428	41-1925313	501(c)3	24,750.	Ο.			Grants and Scholarships
			,				
LAKE AREA DISCOVERY CENTER							
3770 BELLAIRE AVE							
WHITE BEAR LAKE, MN 55110	41-1937239	501(c)3	44,575.	0.			Grants and Scholarships
BLOOM EARLY LEARNING							
17805 County Road 6	44 4000040	F01 ( ) 2					
Plymouth, MN 55447	41-1939043	501(0)3	52,662.	0.			Grants and Scholarships
<b>MetroKids</b>							
310 S 7th Street							
Minneapolis, MN 55415	41-1949182	501(c)3	10,812.	Ο.			Scholarships

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Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	irt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EXCELL ACADEMY FOR HIGHER LEARNING							
CHARTER SCHOOL - 6510 ZANE AVE N -							
BROOKLYN PARK, MN 55429	41-1968867	501(a)	36,218.	0.			Grants and Scholarships
BROOKLIN PARK, MN 55429	41-1908807	501(0)5	30,210.	0.			Grancs and Scholarships
ATREBLA EARLY LEARNING CENTER							
2101 East 35th Street							
Minneapolis, MN 55407	41-1995090		13,510.	0.			Scholarships
MICHELLE HERZOG							
3110 W 173rd St							
Jordan, MN 55352	41-2010877		5,500.	Ο.			Grant
,			,				
Tracie Rieder							
3924 Birmingham Lane Northwest							
Rochester, MN 55901	41-2015554		7,566.	0.			Grant
Ind School District 191							
200 Burnsville Parkway West							
Burnsville, MN 55337	41 - 6000802	501(c)3	14,425.	0.			Scholarships
ISD 276 - MINNETONKA							
ATTN: MINNETONKA PRESCHOOL & ECFE							
4584 VINE HILL ROAD - EXCELSIOR,							
MN 55331	41 - 6001402	501(c)3	15,668.	0.			Scholarships
ISD 278 - ORONO							
5050 Independence Street							
Maple Plain, MN 55359	41-6001403	501(c)3	19,380.	0.			Scholarships
ISD 273 - EDINA							
5701 NORMANDALE RD				_			
EDINA, MN 55424	41-6001406	501(c)3	67,192.	0.			Scholarships
ROBBINSDALE AREA SCHOOLS							
3725 PILGRIM LN N	41 6001400	F01/a)2	00 100				Cabolonabing
PLYMOUTH, MN 55441	41-6001408	201(6)2	20,133.	٥.			Scholarships

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Schedule I (Form 990) TILLIIK SILLA	1 1 1					2	LI-1200301 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	urt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISD 272 - EDEN PRAIRIE							
8100 School Road							
Eden Prairie, MN 55344	41-6001462	501(c)3	51,313.	0.			Scholarships
ISD 284 - WAYZATA							
17340 County Road 6							
Plymouth, MN 55447	41-6001464	501(c)3	6,706.	0.			Scholarships
riymouch, mi 55447	41-0001404	501(0/5	0,700.	0.			
Independent School District No 283							
6300 Walker Street							
St. Louis Park, MN 55416	41-6001466	501(c)3	24,425.	0.			Scholarships
· · · ·			,				
Independent School District No 745							
30 Forest Avenue							
Albany, MN 56307	41-6003949	501(c)3	5,453.	0.			Scholarships
TORAH ACADEMY							
2800 JOPPA AVE							
ST LOUIS PARK, MN 55416	41-6007486	501(c)3	121,711.	0.			Scholarships
Regents of the University of							
Minnesota - NW 5960 - MINNEAPOLIS,							
MN 55485	41-6007513	501(c)3	24,075.	0.			Grants and Scholarships
ISD 621-Silver View Education							
Center - 2574 Mounds View							
Boulevard - Mounds View, MN 55112	41-6008084	501(c)3	16,270.	0.			Grant
ISD 624 - WHITE BEAR LAKE							
4855 BLOOM AVE							
WHITE BEAR LAKE, MN 55110	41-6008212	501(c)3	9,120.	0.			Scholarships
ISD 270 - HOPKINS							
125 Monroe Avenue South							
Hopkins, MN 55343	41-6008248	501(c)3	25,483.	0.			Scholarships
	11 0000240		25, = 05.	· ·	1	1	P

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNAL IN THERE AND							
OLDEN VALLEY LUTHERAN CHURCH							
OLDEN VALLEY, MN 55422	41-6009103	501(c)3	41,654.	0.			Scholarships
ODGE NATURE PRESCHOOL & THOMAS	11 0005105	501(0)5	11,001.	••			
RVINE NATURE CENTER - 1715							
HARLTON ST - WEST ST PAUL, MN							
, 55118	41-6081794	501(c)3	8,104.	0.			Scholarships
			,				
ROXANNE WILLIAMS							
Nestminster Street							
Saint Paul, MN 55130	42-1643762		21,045.	0.			Scholarships
LA PETITE ACADEMY INC							
32209 COLLECTION CENTER DR							
CHICAGO, IL 60693	43-1243221		36,263.	0.			Scholarships
LIT'L SPROUTS CHILD CARE CENTER							
INC - 404 Whiskey Road Northwest -							
Isanti, MN 55040	43-2071326		25,067.	0.			Grants and Scholarships
IBAIICI, MN 55040	45 2071520		25,007.	0.			
US Toy Co Inc							
- L3201 Arrington Road							
Frandview, MN 64030	44-0577574		77,216.	0.			Grant
· · · · · · · · · · · · · · · · · · ·							
Cathedral Hill Montessori School							
29 Dayton Ave							
aint Paul, MN 55102	45-1062357	501(c)3	10,677.	0.			Scholarships
New Creations Child Care &							
earning Center, LLC - Coon Rapids							
1805 Gateway Drive - Coon							
apids, MN 55448	45-2102817		219,303.	0.			Grants and Scholarships
MCA OF THE GREATER TWIN CITIES							
51 NICOLLET MALL STE 500	45 05 0000	F01/->>	040 544				
MINNEAPOLIS, MN 55402	45-2563299	DAT(C)3	242,511.	0.			Grants and Scholarships

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Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	s and Domestic Go	vernments (Sch	edule I (Form 990), Pa	Int II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANGELS LEARNING CENTER LLC							
7624 BROOKLYN BLVD							
BROOKLYN PARK, MN 55443	45-3984850		68,797.	0.			Scholarships
CHERYL O'NEIL							
14660 Greenridge Lane							
Burnsville, MN 55306	45-4464434		5,810.	0.			Grants and Scholarships
COMMUNITY OF SAINTS REGIONAL							
CATHOLIC PRESCHOOL - 335 HURLEY ST	45 4004040						
E - WEST ST PAUL, MN 55118	45-4804818	501(c)3	8,994.	0.			Scholarships
SMC Ventures Inc							
5595 Memorial Avenue North							
Oak Park Heights, MN 55082	45-4955643		13,744.	0.			Scholarships
,			, ,				
MI FAMILIA CHILD CARE CENTER							
2855 47th Street East							
Inver Grove Heights, MN 55076	45-5587465		47,606.	٥.			Grants and Scholarships
PLYMOUTH ACADEMY							
911 Plymouth Avenue North	46-0999347		29.011	0.			Quents and Gabelenshins
Minneapolis, MN 55411	46-0999347		28,911.	0.			Grants and Scholarships
TAMARA FRANK-LEONZAL							
3334 White Oaks Lane							
Woodbury, MN 55125	46-1594573		6,000.	٥.			Grant
Muna Ali							
664 BLAIR AVE							
ST PAUL, MN 55104	46-1623792		32,089.	0.			Grants and Scholarships
NTCOLE MINUE							
NICOLE MINKE 8124 CLINTON AVE S							
BLOOMINGTON, MN 55420	46-2154369		10,225.	0.			Scholarships
		l		· · ·	1	1	T

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash	<b>(f)</b> Method of valuation	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
organization or government			Cash grant	assistance	(book, FMV, appraisal, other)		
CEDAR RIVERSIDE CHILD CARE CENTER							
406 Cedar Ave. South							
Minneapolis, MN 55454	46-2350408		151,619.	0.			Grants and Scholarships
Early Steps Learning Foundation							
122 42nd Avenue North							
Crystal, MN 55422	46-4224707		42,097.	0.			Grants and Scholarships
Michelle Weiler							
516 14th Street Southwest							
Villmar, MN 56201	46-4745432		5,165.	0.			Grant
IINNESOTA CHILD CARE CENTER							
11NNESOTA CHILD CARE CENTER 312 West Lake Street							
finneapolis, MN 55408	46-5432100		42,602.	0.			Scholarships
Alimeaports, MN 55400	40-5452100		42,002.	0.			
DLUS CENTER LLC							
1315 12TH AVE N							
AINNEAPOLIS, MN 55411	46-5562909		299,719.	0.			Scholarships
MIDWEST CHILD DEVELOPMENT LLC							
L514 Englewood Avenue							
St. Paul, MN 55104	46-5605732		11,913.	0.			Scholarships
MONTESSORI AMERICAN INDIAN							
CHILDCARE CENTER - 1909 Ivy Avenue	47-0972540		24 055				Gabolarghing
Cast - Saint Paul, MN 55119	4/-09/2540		24,055.	0.			Scholarships
ESFA International School Inc							
201 Noble Ave N							
Brooklyn Center, MN 55429	47-1553568	501(c)3	24,530.	0.			Scholarships
LITTLE STEPS CHILDCARE LLC							
906 DALE ST N							
ST PAUL, MN 55103	47-1890116		67,183.	0.			Scholarships

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Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	overnments (Sche	edule I (Form 990), Pa	rt II.) T	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Heartwood Montessori School							
229 13th Ave NE							
Minneapolis, MN 55413	47-2241441	501(c)3	25,912.	0.			Grants and Scholarships
CREATIVE WONDERS CHILDCARE							
5985 Carmen Avenue East	45 0500400		0.7.000				
Inver Grove Heights, MN 55076	47-2702433		27,290.	0.			Scholarships
LINDA E POIKONEN							
106 Angel Ave. NW							
Watertown, MN 55388	47-2818502		5,652.	0.			Grant
,							
FIRST DAY CARE CENTER LLC							
1433 East Franklin Avenue							
Minneapolis, MN 55404	47-3011295		26,980.	0.			Grants and Scholarships
ABC123 CHILD ENRICHMENT CENTER LLC							
1710 Center Avenue West			10 500				
Dilworth, MN 56529	47-3301517		10,560.	0.			Scholarships
FUTURE LEADERS EARLY LEARNING							
CENTER - 3641 Chicago Ave S -							
Minneapolis, MN 55407	47-3384448		6,250.	0.			Scholarships
- /			, .				_
Bright Minds Child Care Center Inc							
950 East Hennepin Avenue							
Minneapolis, MN 55414	47-3543250		6,775.	0.			Scholarships
Next Best Thing To Grandma							
38155 Forest Boulevard				_			
North Branch, MN 55056	47-3579709		7,180.	0.			Scholarships
GRISELDA ARAIZA FIGUEROA							
9187 Parkside Drive							
Woodbury, MN 55125	47-3606524		6,000.	0.			Grant

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Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.) T	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHITTIER WILDFLOWERS PRESCHOOL							
2608 BLAISDELL AVE S							
MINNEAPOLIS, MN 55408	47-3784045	501(c)3	11,760.	0.			Scholarships
MINNEAFOLIS, MN 55406	47-5784045	501(075	11,700.	0.			
KUEHG Corp							
5005 Meadows Road							
Lake Oswego, MN 97035	47-4478313		2,890,818.	Ο.			Grants and Scholarships
- ,			, ,				
A & M CHANHASSEN CHILDCARE INC							
1430 PARK CT							
CHANHASSEN, MN 55317	47-4632146		10,555.	0.			Grants and Scholarships
Zakia, Inc.							
16351 Holbrook Avenue							
Lakeville, MN 55044	61-1435063		103,378.	0.			Scholarships
Maria E Vega							
1570 3RD ST E				_			
ST PAUL, MN 55106	68-0547391		11,080.	0.			Grants and Scholarships
Learn and Grow Child Care Center							
South Inc - 1201 89TH AVE NE STE							
120 - BLAINE, MN 55434	68-0585891		13,938.	0.			Scholarships
DIATINE, MN 55454	00 0505051		13,550.	0.			
Christina's Child Care Center							
5510 W BROADWAY AVE							
CRYSTAL, MN 55428	80-0501443		41,703.	0.			Scholarships
,,							<u>-</u> -
VAYNAPICHU LLC							
1601 Nicollet Ave							
Minneapolis, MN 55403	80-0512565		5,722.	0.			Scholarships
PRODEO ACADEMY							
141 University Avenue Northeast							
Columbia Heights, MN 55421	80-0743744	501(c)3	12,500.	Ο.			Scholarships

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TENDER CHILD CARE LLC							
15 Winifred St W							
Saint Paul, WI 55107	80-0753140		9,049.	0.			Grants and Scholarships
Kinder Village LLC							
504 East Lynnhurst Avenue							
Saint Paul, MN 55104	80-0963612		19,140.	0.			Grants and Scholarships
JOYCE PRESCHOOL							
3400 PARK AVE							
MINNEAPOLIS, MN 55407	81-0594016	501(c)3	31,733.	0.			Grant
Little B's Learning Center LLC							
3690 County Road 13							
Barnum, MN 55707	81-0761920		18,474.	0.			Scholarships
Early Years Academy Inc							
807 Main St. N. Suite B							
Cambridge, MN 55008	81-0778432		7,735.	0.			Scholarships
MALYNDA LYN ZULEGER							
8270 MONROE ST NE							
SPRING LAKE PARK, MN 55432	81-1159263		6,000.	0.			Grant
Echo Yerke							
5601 Falcon avenue							
Pine City, MN 55063	81-1614834		8,587.	0.			Scholarships
MENDERGARE LEADNING COMMENTS							
TENDERCARE LEARNING CENTER LLC 8040 Old Cedar Ave South STE 3							
Bloomington, MN 55425	81-2330797		67,800.	0.			Scholarships
5100mingcon, mi 55425	51 2550757			0.			
Millennium Learning Center - Eagan							
4565 Scott Trail							
Eagan, MN 55122	81-2660774		9,342.	0.			Scholarships

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Part II Continuation of Grants and Other		nestic Organizations	and Domestic Go	vernments (Sch	adula I (Form 990) Pa		L-1200501 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALL AGES AND FACES ACADEMY							
580 Fuller Ave							
Saint Paul, MN 55103	81-2775730		103,863.	0.			Grants and Scholarships
KIDS GARDEN DAYCARE							
959 Minnehaha Avenue							
Saint Paul, MN 55104	81-3125051		53,241.	0.			Scholarships
NAKIA HOWARD							
7297 Stillwater Blvd. N							
Oakdale, MN 55128	81-3286773		68,553.	0.			Scholarships
Gradepower Learning Center							
1055 Westgate Drive							
Saint Paul, MN 55114	81-3386099		22,146.	0.			Scholarships
i							
EXPANDING MINDS CHILDCARE LLC							
2950 MORGAN AVE N							
MINNEAPOLIS, MN 55411	81-3580615		25,904.	0.			Scholarships
IT STARTS WITH LUV CHILDCARE LLC							
2604 42ND AVE N							
MINNEAPOLIS, MN 55412	81-4038921		66,675.	0.			Grants and Scholarships
EG GEG WAYGAMA IIG							
ES SBS WAYZATA LLC							
4355 N Hwy 169	01 4004510		11 400	0			
Plymouth, MN 55442	81-4204519		11,496.	0.			Scholarships
ES SBS SOUTHDALE LLC							
4355 N Hwy 169							
Plymouth, MN 55442	81-4218249		58,553.	0.			Grants and Scholarships
ES SBS ST ANTHONY LLC							
4355 US-169 N							
PLYMOUTH, MN 55442	81-4232297		42,921.	٥.			Grants and Scholarships

Schedule I (Form 990) Think Sma							1-1260581 Pag
Part II Continuation of Grants and Other	Assistance to Don		and Domestic Go	vernments (Sche	edule I (Form 990), Pa	Irt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ES SBS PLYMOUTH LLC							
4355 HWY 169 N							
PLYMOUTH, MN 55442	81-4246308		20,243.	0.			Scholarships
ES SBS MAPLE LLC							
4355 Hwy 169 N							
Plymouth, MN 55442	81-4264126		51,677.	0.			Scholarships
ES SBS BROOKLYN PARK							
4355 N Hwy 169							
Plymouth, MN 55442	81-4309057		234 872	0.			Scholarships
riymouth, MN 55442	81-4309037		234,872.	0.			
ABC Learning Center							
2533 24th Avenue South							
Minneapolis, MN 55406	81-4727433		28,169.	0.			Grants and Scholarships
Katrina Foiles							
8562 Ridge Crest Drive Northwest							
Rochester, MN 55901	81-4728889		5,376.	0.			Grant
HAZEL PARK LEARNING CENTER							
1831 MINNEHAHA AVE E ST PAUL, MN 55119	81-4816371	501/a	34,954.	0.			Scholarships
	01-40103/1	501(075	54,554.	0.			scholarships
Ayah Child Care Center							
508 40th Avenue Northeast							
Minneapolis, MN 55421	81-5267240		11,187.	0.			Grants and Scholarships
MY CHILDCARE PLUS INC							
1323 BURR ST	00.0620004		60.400				a halanahina
ST PAUL, MN 55130	82-0638294		62,428.	0.			Scholarships
Brandie's Little Bear Learning							
Center LLC - 1250 Industrial Park							
Drive – Eveleth, MN 55734	82-1341195		5,510.	Ο.			Scholarships

Schedule I (Form 99	)) Think	Small
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Part II Continuation of Grants and Other		nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NCCC, LLC							
11806 Aberdeen Street Northeast							
Blaine, MN 55449	82-1940679		93,553.	0.			Scholarships
NEW CREATIONS CHILD CARE &							
LEARNING CENTER AT MAPLE GROVE -							
9827 MAPLE GROVE PKWY - MAPLE							
GROVE, MN 55369	82-1940848		15,208.	0.			Grants and Scholarships
			, -				-
Rainbow Montessori LLC							
8736 Nicollet Ave S							
Bloomington, MN 55420	82-2329471		25,861.	٥.			Grants and Scholarships
MINNESOTA WILDFLOWER MONTESSORI							
SCHOOL - 1330 Lagoon Ave -							
Minneapolis, MN 55408	82-3187122	501(c)3	133,776.	0.			Scholarships
Laura Hochsprung Family Childcare							
19321 40th St							
Brownton, MN 55312	82-3878184		7,539.	0.			Scholarships
RACHEL HANSON							
2764 180th Street East							
Prior Lake, MN 55372	82-3908217		5,027.	0.			Grant
ACADEMIA ELZE							
4 W FRANKLIN AVE							
MINNEAPOLIS, MN 55404	82-4001502		9,695.	0.			Scholarships
TA AUTI DANDE & DI GOMEDN I DN AMD							
TLC CHILDCARE & DISCOVERY LRN CTR							
1051 Forest Street North	0.0 4700077						and a hole 1
Saint Paul, MN 55106	82-4708877		60,283.	0.			Grants and Scholarships
My Four & No More LLC							
363 Winthrop St. S.							
Saint Paul, MN 55119	83-1777548		37,819.	٥.			Grants and Scholarships
Sallic Faul, MN 33113	03-1///340		37,819.	0.			Prants and Scholarships

Schedule I (Form 990)	Think	Small
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Schedule I (Form 990) TILLIIK SIIIa				(Cab			1-1260381 Page
Part II Continuation of Grants and Other A	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	π II.) 	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NUUR FAMILY CHILD CARE							
1291 Hillwind Road Northeast							
Fridley, MN 55432	83-2283185		10,340.	0.			Scholarships
			,				
Jain Enterprises IV Inc							
1815 Bromley Street							
South Saint Paul, MN 55075	83-3337183		7,458.	0.			Grants and Scholarships
Serephim Montessori LLC							
3105 65th Street East	00 4407405						
Inver Grove Heights, MN 55076	83-4437196		35,065.	0.			Scholarships
ST PASCAL REGIONAL CATHOLIC SCHOOL							
1757 Conway St							
St Paul, MN 55106	84-1943812	501(c)3	5,500.	0.			Scholarships
							· · · · · · · · · · · · · · · · · · ·
Woodbury Spanish Immersion Early							
Learning Academy - 8420 City							
Centre Drive - Woodbury, MN 55125	84-3482713		9,205.	0.			Grants and Scholarships
Careone Childcare Center Inc							
116 East 32nd Street							
Minneapolis, MN 55408	84-4003829		16,357.	0.			Grants and Scholarships
LEE YANG 1920 Nevada Avenue East							
Saint Paul, MN 55119	84-4079355		12,370.	0.			Grants and Scholarships
Saint Faul, Mi 55119	04-4079333		12,370.	0.			
New Day Family Child Care Center							
LLC - 4555 North Dupont Avenue -							
Minneapolis, MN 55412	84-4213482		41,051.	0.			Scholarships
;							
Aurora Academy Inc							
1048 Aurora Avenue							
Saint Paul, MN 55104	84-4938435		10,123.	٥.			Grants and Scholarships

Schedule I	(Form 990	) Th	ink	Small
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Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	1-1200581 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
High Hopes Childcare Inc							
1925 Portland Avenue							
Minneapolis, MN 55404	86-3233009		20,040.	٥.			Scholarships
A & M Carver Child Care Inc							
1730 Monroe Drive							
Carver, MN 55315	87-3535976		6,541.	٥.			Grants and Scholarships
Gan Preschool, LLC							
1780 Ford Pkwy							
Saint Paul, MN 55116	87-3707992		7,098.	٥.			Scholarships
Nicole Baudouin							
513 9th Avenue South							
South Saint Paul, MN 55075	88-0589894		6,000.	0.			Grant
Train Em' Up Childcare LLC							
3622 Queen Ave N							
Minneapolis, MN 55412	88-1327006		23,559.	0.			Grants and Scholarships
Rayito de Sol - Minnetonka, LLC							
3520 Williston Road							
Minnetonka, MN 55345	88-1373915		23,203.	٥.			Grants and Scholarships
Clover Montessori School							
1025 Dodd Road							
West Saint Paul, MN 55118	88-1621075	501(c)3	5,776.	٥.			Grants and Scholarships
west Saint Fadi, My SSIIS	00 1021075	501(0)5	5,770.	·.			
Caring & Sharing Daycare LLC							
116 2nd Street Northwest							
Aitkin, MN 56431	93-1359231		10,617.	0.			Scholarships
The Little Bee's Child Care Corp							
1630 County Highway 10							
Spring Lake Park, MN 55432	93-3621347		5,498.	٥.			Grants and Scholarships
Spring Bake rark, IM 55452	55 5021547		J 3, ± 70.	· ·			Pranes and senorarsi

(a) Name and address of		(a) IDC assticr	(d) Amount of	(a) Amount of	(f) Mathad at	(a) Description of	(b) Durnage of grant
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KESHORE LEARNING MATERIALS							
95 E DOMINGUEZ STREET							
RSON, MN 90895	94-1525814		655,679.	٥.			Grant

# 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. (b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance (e) Method of valuation (f) Description of noncash assistance (a) Type of grant or assistance (b) Number of recipients (c) Amount of cash grant (c) Amount of cash assistance (b) Method of valuation (f) Description of noncash assistance

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Scholarships	27	834,955.	0.		
Grants	122	554,183.	0.		
Part IV Supplemental Information Drovide the information re-	 www.inad.in.Dout.L.lin	o Or Dort III. oolumn	(b), and any other of		l

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

Part I, Line 2:

The Organization has designated budget owners to monitor grant spending.

Every month, the finance group provides reports of the expenditures against

the budget and provides detailed reports to the program leaders. Then, each

of the owners signs off on the spending and invoices, which are then

forwarded to the state's contract.

41-1260581 Page 2

Schedule I (Form 990) 2023

Part III

Think Small

SC	HEDULE J	Compensation Information		OMB No.	1545-00	47	
	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	22	)	
-	-	Compensated Employees		20	<b>Z</b> J	)	
Dopo	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23 Attach to Form 990.		Open to	Publ	lic	
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspection			
Nam	ne of the organization			identificatio		mber	
		Think Small	41-1	126058	1		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a		ate box(es) if the organization provided any of the following to or for a person listed on For	n 990,				
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or c						
	Travel for com	· · · · · · · · · · · · · · · · · · ·					
		ation and gross-up payments					
	Discretionary	spending account Personal services (such as maid, chauff	eur, chef)				
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or					
•		provision of all of the expenses described above? If "No," complete Part III to explain		<u>1b</u>		-	
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		<u> </u>	
2	Indianta which if a	are of the following the exception used to establish the compensation of the exception					
3		ny, of the following the organization used to establish the compensation of the organization					
		ector. Check all that apply. Do not check any boxes for methods used by a related organiza ation of the CEO/Executive Director, but explain in Part III.					
	X Compensation						
		compensation consultant X Compensation survey or study					
	X Form 990 of o		committee				
			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 re						
а	•	e payment or change-of-control payment?		4a		x	
b		eive payment from a supplemental nonqualified retirement plan?				X	
с	-	eive payment from an equity-based compensation arrangement?		1-		X	
	-	nes 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 of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensat	ion				
	contingent on the r	evenues of:					
а	The organization?			5a		X	
		ation?				X	
		or 5b, describe in Part III.					
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensat	ion				
	contingent on the n	et earnings of:					
а	The organization?			<u>6a</u>		X	
		ation?				X	
		or 6b, describe in Part III.					
7	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed paymen	ts				
	not described on lir	nes 5 and 6? If "Yes," describe in Part III		7		X	
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to	the				
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X	
9	If "Yes" on line 8, d	id the organization also follow the rebuttable presumption procedure described in					
	Regulations section		<u></u>	9			
For	Paperwork Reducti	ion Act Notice, see the Instructions for Form 990.	Scheo	dule J (Forn	n 990)	) 2023	

14370326 759492 48662

#### 41-1260581

Page **2** 

#### 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-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Barbara Yates	(i)	239,319.	0.	0.	29,342.	3,850.	272,511.	0.
President and CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Mark Cross	(i)	191,141.	0.	0.	11,415.	0.	202,556.	0.
Chief Operating Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) Cisa Keller	(i)	143,218.	0.	0.	7,890.	1,200.	152,308.	0.
SVP EC Quality Development	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

SCHEDULE O (Form 990)



## Form 990, Part VI, Section B, line 11b:

Think Small

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.

Form 990, Part VI, Section B, Line 15: The CEO and senior management's pay is set through a process that looks at both outside market data and internal pay structures. Think Small uses industry salary surveys and compensation databases to compare wages. The For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA 332211 11-14-23

Schedule O (Form 990) 2023	Page <b>2</b>		
Name of the organization Think Small	Employer identification number 41-1260581		
Board of Directors reviews this information and decides t	he CEO's salary		
based on market trends, the company's budget, and other f	actors. The CEO		
decides the pay for other senior managers.			

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.

(Rev. January 2024)

## Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service

#### File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<u>must use</u>	Form 7004 to request an extension of time to file incom	e tax retur	ns.					
Part I - Ic	dentification			r				
Type or	Name of exempt organization, employer, or other filer	Taxpayer	Taxpayer identification number (TIN)					
Print	Think Small	41-1260581						
File by the due date for filing your	ate for Number, street, and room or suite no. If a P.O. box, see instructions.							
return. See instructions.	City, town or post office, state, and ZIP code. For a for Saint Paul, MN 55117	oreign addi	ress, see instructions.					
Enter the	Return Code for the return that this application is for (file	e a separat	te application for each return)			01		
Application Is For		1	Application Is For		<u></u>			
		Code				Return Code		
Form 990	) or Form 990-EZ	01	Form 4720 (other than individual)	09				
	20 (individual)	03	Form 5227			10		
Form 990-PF		04	Form 6069			11		
	D-T (sec. 401(a) or 408(a) trust)	05	Form 8870		12			
	D-T (trust other than above)	06	Form 5330 (individual)		13			
	D-T (corporation)	07	Form 5330 (other than individual)	14				
Form 104		08						
The bo Teleph	none No. <u>651-641-0305</u>	- Sai	.nt Paul, MN 55117 Fax No					
	organization does not have an office or place of business							
. г	is for a Group Return, enter the organization's four-digit (							
box	. If it is for part of the group, check this box							
	equest an automatic 6-month extension of time until <u>Ma</u> e organization named above. The extension is for the orga calendar year 20 or			e the exem	ipt organizat	ion return for		
Х		, 20 <u>_</u>	23 , and ending JUN 30 .			, 20 <b>24</b>		
2 If th	ne tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reaso	on: Initial return	Final retur	n			
	his application is for Forms 990-PF, 990-T, 4720, or 6069	, enter the	tentative tax, less	2-	¢	0		
	y nonrefundable credits. See instructions.	opto: or	refundable eredite and	<u>3a</u>	\$	0		
	nis application is for Forms 990-PF, 990-T, 4720, or 6069 imated tax payments made. Include any prior year overp		3b	\$	0			
	lance due. Subtract line 3b from line 3a. Include your pa				<u> </u>	0		
1101	ng EFTPS (Electronic Federal Tax Payment System). See	instructio	ns	3c	\$			

For Privacy Act and Paperwork Reduction Act Notice, see instructions.