Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at www IRS gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 04-01-2015 , and ending 03-31-2016

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
TWIN CITIES SCHOOLS' TELECOMMUNICATIONS GROUP

Doing business as
VOQAL TWIN CITIES

Number and street (or P O box if mail is not delivered to street address) | Room/suite
PO BOX 6060

City or town, state or province, country, and ZIP or foreign postal code
BOULDER, CO 803066060

D Employer identification number
41-1804970

E Telephone number
(303) 532-2852

G Gross receipts $ 944,796

F Name and address of principal officer
JOHN SCHWARTZ
PO BOX 6060
BOULDER, CO 803066060

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (4) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW TCSTG ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1983

M State of legal domicile MN

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
THE CORPORATION IS ORGANIZED AND WILL BE OPERATED EXCLUSIVELY FOR "CHARITABLE, SCIENTIFIC AND EDUCATIONAL- AND "SOCIAL WELFARE" PURPOSES WITHIN THE MEANING OF SECTIONS 501(C)(3) AND 501(C)(4), RESPECTIVELY, OF THE INTERNAL REVENUE CODE TO THIS END, THE NONPROFIT SHALL UNDERTAKE ACTIVITIES TO SUPPORT THE PROVISION OF QUALITY AND DIVERSE INSTRUCTIONAL MEDIA CONTENT AND CAPABILITIES TO EDUCATORS AND STUDENTS, INCLUDING, BUT NOT LIMITED TO, DATA SERVICES AND INSTRUCTIONAL VIDEO PROVIDED TO ACCREDITED EDUCATIONAL INSTITUTIONS AND GOVERNMENTAL ORGANIZATIONS ENGAGED IN THE FORMAL EDUCATION OF ENROLLED STUDENTS FOSTER OPEN, HONEST AND OUTSPOKEN MEDIA THAT HELP USERS TO BE A POPULAR DEMOCRATIC CHECK ON BOTH GOVERNMENT POWER AND CONCENTRATED PRIVATE PRIVILEGE, EXPAND THE DISSEMINATION OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM, THAT OFFER DISSENTING, ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE INFORMATION AND CONCEPTS TO THE MARKETPLACE OF IDEAS IN BOTH LOCAL AND GLOBAL CONTEXTS, ENGAGE IN ADDI

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	4
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	3
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	10,627
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		1,643
	9	Program service revenue (Part VIII, line 2g)	22,429	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	116,822	122,778
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	472,298	458,015
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	611,549	582,436
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	255,000	255,000
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	122,238	0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	129,128	354,231
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	506,366	609,231
	19	Revenue less expenses Subtract line 18 from line 12	105,183	-26,795

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	5,415,936	5,375,415
	21	Total liabilities (Part X, line 26)	115,769	179,017
	22	Net assets or fund balances Subtract line 21 from line 20	5,300,167	5,196,398

Part II Signature Block

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

Sign Here

****** 2017-02-14
Signature of officer Date

ADAM MILLER COO/ASSISTANT SEC
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
ROBERT E FABRY CPA	ROBERT E FABRY CPA	2017-02-14		P00757821

Firm's name ▶ BAUERLE AND COMPANY PC | Firm's EIN ▶ 84-0817888

Firm's address ▶ 7887 E BELLEVIEW AVE STE 700 DENVER, CO 801116021 | Phone no (303) 759-0089

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

THE CORPORATION IS ORGANIZED AND WILL BE OPERATED EXCLUSIVELY FOR "CHARITABLE, SCIENTIFIC AND EDUCATIONAL- AND "SOCIAL WELFARE" PURPOSES WITHIN THE MEANING OF SECTIONS 501(C)(3) AND 501(C)(4), RESPECTIVELY, OF THE INTERNAL REVENUE CODE TO THIS END, THE NONPROFIT SHALL UNDERTAKE ACTIVITIES TO SUPPORT THE PROVISION OF QUALITY AND DIVERSE INSTRUCTIONAL MEDIA CONTENT AND CAPABILITIES TO EDUCATORS AND STUDENTS, INCLUDING, BUT NOT LIMITED TO, DATA SERVICES AND INSTRUCTIONAL VIDEO PROVIDED TO ACCREDITED EDUCATIONAL INSTITUTIONS AND GOVERNMENTAL ORGANIZATIONS ENGAGED IN THE FORMAL EDUCATION OF ENROLLED STUDENTS FOSTER OPEN, HONEST AND OUTSPOKEN MEDIA THAT HELP USERS TO BE A POPULAR DEMOCRATIC CHECK ON BOTH GOVERNMENT POWER AND CONCENTRATED PRIVATE PRIVILEGE, EXPAND THE DISSEMINATION OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM, THAT OFFER DISSENTING, ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE INFORMATION AND CONCEPTS TO THE MARKETPLACE OF IDEAS IN BOTH LOCAL AND GLOBAL CONTEXTS, ENGAGE IN ADDI

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

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? . . . . ☑ Yes ☐ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 17,595 including grants of $) (Revenue $)

THE ORGANIZATION DELIVERED INSTRUCTIONAL TELEVISION PROGRAMS TO ELEMENTARY AND SECONDARY SCHOOLS THROUGH JULY 2015 THE ORGANIZATION ALSO PROVIDES THESE SCHOOLS WITH FREE OR LOW COST WIRELEESS INTERNET (AS DESCRIBED IN SCHEDULE O) WHICH CONTINUES VOQAL EDUCATION'S NEWEST EFFORT, EDUCATION VENTURE FUND, SEEKS TO REDUCE OPPORTUNITY GAPS IN EDUCATION BY LOCATING AND FUNDING TECHNOLOGY START-UPS WITH IDEAS TO REDUCE GAPS

4b (Code) (Expenses $ 318,043 including grants of $ 255,000) (Revenue $)

GRANTS IN SUPPORT OF THE ORGANIZATION'S PHILANTHROPIC VALUES

4c (Code) (Expenses $ including grants of $) (Revenue $ -138,459)

THE ORGANIZATION PROVIDED DATA SERVICES TO EDUCATIONAL AND NON PROFIT ENTITIES THROUGH ITS INVESTMENT IN MOBILE CITIZEN, LLC THE PROGRAM REVENUE AND EXPENSES FLOWING THROUGH TO THE ORGANIZATION FROM MOBILE CITIZEN CURRENT YEAR SCHEDULE K-1 WERE 105,151 AND 196,740 RESPECTIVELY PRIOR YEAR SUSPENDED LOSSES TOTALING 46,870 WERE ALSO RECOGNIZED IN THE CURRENT FISCAL YEAR TOTAL LOSSES RECOGNIZED FROM MOBILE CITIZEN, LLC WERE (138,459)

See Additional Data

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

4e **Total program service expenses ▶** 335,638

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		No
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		No
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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
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? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
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		No
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		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	**1a**	14			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	**1b**	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			**1c**		
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**	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			**2b**		
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .			**3a**	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .			**3b**	Yes	
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)? . .			**4a**		No
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)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .			**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**		
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			**7f**		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**		
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**		
9a	Did the sponsoring organization make any taxable distributions under section 4966? . . .			**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .			**9b**		
10	**Section 501(c)(7) organizations.** Enter					
a	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					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			**13a**		
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**				
c	Enter the amount of reserves on hand	**13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			**14b**		

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

Check if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a** 4			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 3			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		**9**		No

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶ MN

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶BECKY SCHOTT 825 DELAWARE AVE SUITE 500 LONGMONT, CO 80503 (303) 532-2852

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JOHN SCHWARTZ CEO/PRESIDEN	6 00 44 00	X		X				0	158,649	40,383
(2) DAVID MCKAY VP/DIRECTOR	5 00	X		X				4,530	0	0
(3) NEAL GOSMAN TREASURER	3 00	X		X				1,740	0	0
(4) DENISE MAYOTTE SECRETARY	2 00	X		X				0	0	0
(5) ADAM MILLER COO/ASSISTAN	2 50 47 50			X				0	119,424	26,123
(6) PATRICIA DWYER CFO	7 50 42 50			X				0	98,642	13,689

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

		(D)	(E)	(F)
1b	Sub-Total ▶			
c	Total from continuation sheets to Part VII, Section A ▶			
d	Total (add lines 1b and 1c) ▶	6,270	376,715	80,195

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
EBS SUPPORT SERVICES, PO BOX 6060 BOULDER, CO 80306	MGMT SUPPORT	186,457

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 1

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations . . .	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 1,643				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f . . . . ▶		1,643			
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		119,917			119,917
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶		585,847			585,847
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) . . . . ▶					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	(i) 365,221				
	b	Less cost or other basis and sales expenses	(i) 362,360				
	c	Gain or (loss)	(i) 2,861				
	d	Net gain or (loss) . . . . ▶		2,861			2,861
	8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . . a					
	b	Less direct expenses . . . . b					
	c	Net income or (loss) from fundraising events . . ▶					
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . . ▶					
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . . ▶					
		Miscellaneous Revenue	Business Code				
	11a	K-1 EBS SUPPORT SERVICES, LLC	561000	10,627		10,627	
	b	K-1 MOBILE CITIZEN, LLC	517919	-138,459	-138,459		
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . ▶		-127,832			
	12	**Total revenue.** See Instructions . . . . . . ▶		582,436	-138,459	10,627	708,625

Part IX Statement of Functional Expenses

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

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

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	255,000	255,000		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management	193,945	34,837	159,108	
b	Legal	42,724		42,724	
c	Accounting	2,500		2,500	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	19,030		19,030	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	28,456	21,610	6,846	
12	Advertising and promotion				
13	Office expenses	4,997	2,567	2,430	
14	Information technology	481	457	24	
15	Royalties . .				
16	Occupancy				
17	Travel	33,047	12,346	20,701	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	434		434	
23	Insurance	5,311		5,311	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	ROYALTY EXPENSE	13,106	4,006	9,100	
b	BOARD OF DIRECTOR FEES	5,670	1,635	4,035	
c	SPONSORSHIPS	3,180	3,180		
d	INVESTMENT EXPENSES	576		576	
e	All other expenses	774		774	
25	**Total functional expenses.** Add lines 1 through 24e	609,231	335,638	273,593	0
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)				

Part X Balance Sheet

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

Section	Line	Description			(A) Beginning of year		(B) End of year
Assets	1	Cash-non-interest-bearing			195,496	1	59,302
	2	Savings and temporary cash investments			1,068,082	2	933,961
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			22,429	4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			3,170	9	805
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	6,155			
	b	Less accumulated depreciation	10b	6,069	520	10c	86
	11	Investments—publicly traded securities			3,603,251	11	3,708,370
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11			522,988	13	672,891
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			5,415,936	16	5,375,415
Liabilities	17	Accounts payable and accrued expenses			75,705	17	126,167
	18	Grants payable				18	
	19	Deferred revenue			40,064	19	52,850
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D				25	
	26	**Total liabilities.** Add lines 17 through 25			115,769	26	179,017
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			5,300,167	27	5,196,398
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			5,300,167	33	5,196,398
	34	Total liabilities and net assets/fund balances			5,415,936	34	5,375,415

Part XI **Reconcilliation 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**	582,436
2	Total expenses (must equal Part IX, column (A), line 25)	**2**	609,231
3	Revenue less expenses Subtract line 2 from line 1	**3**	-26,795
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	**4**	5,300,167
5	Net unrealized gains (losses) on investments	**5**	-76,974
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 in Schedule O)	**9**	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	**10**	5,196,398

Part XII **Financial Statements and Reporting**

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	**2a**		No
	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**		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	**2c**		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	**3a**		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	**3b**		

Additional Data

Software ID:
Software Version:
EIN: 41-1804970
Name: TWIN CITIES SCHOOLS' TELECOMMUNICATIONS GROUP

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ including grants of $) (Revenue $)

THE ORGANIZATION THROUGH ITS INVESTMENT IN AN UNRELATED ORGANIZATION TAXABLE AS A PARTNERSHIP UNDERTOOK ACTIVITIES TO EXPAND THE DISSEMINATION OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM, THAT OFFER DISSENTING, ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE INFORMATION AND CONCEPTS TO THE MARKETPLACE OF IDEAS IN BOTH LOCAL AND GLOBAL CONTEXTS

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
TWIN CITIES SCHOOLS' TELECOMMUNICATIONS GROUP

Employer identification number
41-1804970

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

(ii) Assets included in Form 990, Part X ▶ $ ______________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ______________

b Assets included in Form 990, Part X ▶ $ ______________

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	3a(i)		
	(ii) related organizations	3a(ii)		
b	If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI **Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		6,155	6,069	86
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				86

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) INDEPENDENT SPECTRUM, LLC	497,300	C
(2) EBS SUPPORT SERVICES, LLC	84,837	C
(3) MOBILE CITIZEN, LLC	55,751	C
(4) PAIRIN INC	11,933	C
(5) NEPRIS INC	11,933	C
(6) EDUCATION MODIFIED INC	11,137	C
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶	672,891	

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* . . . . ▶	

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

1. (a) Description of liability	(b) Book value
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information

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

Return Reference	Explanation

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
TWIN CITIES SCHOOLS' TELECOMMUNICATIONS GROUP

Employer identification number
41-1804970

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 4

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 4

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance

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

Return Reference	**Explanation**
SCHEDULE I, PAGE 4, PART IV	SCHEDULE I, PART I, LINE 2 PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN U S SCHEDULE I, PART I, LINE 2 IN THE CASE OF APPLICANTS WITH WHOM THE ORGANIZATION HAS A FORMAL GRANT AGREEMENT, THE AGREEMENT OUTLINES WHEN THE PAYMENTS ARE TO BE MADE AND USUALLY REQUIRES THE GRANTEE TO SUBMIT A REPORT, IN DETAIL, EXPLAINING HOW THEY USED THE FUNDS IN A NARRATIVE OF THEIR WORK THE REPORTS ARE THEN REVIEWED BY ONE OR MORE STAFF MEMBERS OR CONTRACT CONSULTANT IF THERE IS ANY DISCREPANCY, THE FINAL PAYMENT WOULD NOT BE MADE UNTIL THE PROBLEM HAS BEEN CORRECTED

Additional Data

Software ID:
Software Version:
EIN: 41-1804970
Name: TWIN CITIES SCHOOLS' TELECOMMUNICATIONS GROUP

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUBLIC COMMUNICATORS INC 2900 WELTON ST SUITE 300 DENVER,CO 80205	51-0173482	501C3	35,000				BLACKNESS PRIME
FAIR VOTE MINNESOTA PO BOX 19440 MINNEAPOLIS,MN 55419	01-0911420	501C4	25,000				CORE FUNDING
VOICES FOR RACIAL JUSTICE 2525 FRANKLIN AVENUE E MINNEAPOLIS,MN 55406	41-1750116	501C3	33,000				CORE FUNDING

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
TWIN CITIES MEDIA ALLIANCE 2600 E FRANKLIN SUITE 2 MINNEAPOLIS,MN 55406	42-1670009	501C3	30,000				CORE FUNDING
NEW MEDIA VENTURES 901 MISSION ST SUITE 205 SAN FRANCISCO,CA 94103	94-3153687	501C4	6,882				CORE FUNDING
TAKE ACTION MINNESOTA 705 RAYMO SUITE 100 ST PAUL,MN 55114	20-3338691	501C4	40,000				CORE FUNDING

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SAINT PAUL NEIGHBORHOOD NETWORK 550 VANDALIA ST SUITE 170 ST PAUL,MN 55114	41-1500773	501C3	30,000				CAPITAL CAMPAIGN
WIN MINNESOTA 1600 UNIVERSITY W SUITE 309C ST PAUL,MN 55104	74-3238362	501C4	50,000				DONOR COLLABORATIVE

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
TWIN CITIES SCHOOLS' TELECOMMUNICATIONS GROUP

Employer identification number
41-1804970

Part I Questions Regarding Compensation

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

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 are not listed on Form 990, Part VII

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JOHN SCHWARTZ CEO/PRESIDENT	(i)	------------	------------	------------	------------	------------	------------	------------
	(ii)	158,649				40,383	199,032	

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

Return Reference	Explanation
SCHEDULE J, PART III	EBS SUPPORT SERVICES, LLC (D/B/A VOQAL) IS OWNED BY FIVE MEMBERS WHICH ARE ALL NONPROFIT ORGANIZATIONS TCSTG IS A MEMBER OF VOQAL AND HAS A 13 81% INTEREST VOQAL WAS CREATED FOR THE PURPOSE OF LEASING PERSONNEL AND PROVIDING CHARED ADMINISTRATIVE SERVICES TO ITS MEMBERS THE AMOUNT SHOWN IN PART II FOR JOHN SCHWARTZ REPRESENTS HIS COMPENSATION FROM VOQAL FOR SERVICES HE PROVIDED TO ALL VOQAL MEMBERS DURING FISCAL 2016

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
TWIN CITIES SCHOOLS' TELECOMMUNICATIONS GROUP

Employer identification number
41-1804970

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total		▶ $										

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
(1) EBS SUPPORT SERVICES LLC	KEY EMPLOYEES	193,945	REIMBURSEMENT		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
SCHEDULE L, PART V	SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS (A) NAME OF PERSON EBS SUPPORT SERVICES, LLC (D) DESCRIPTION OF TRANSACTION REIMBURSEMENT FOR SHARED COSTS SCHEDULE L, PART IV BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS EBS SUPPORT SERVICES LLC IS OWNED BY FIVE MEMBERS WHICH ARE ALL NONPROFIT ORGANIZATIONS TCSTG IS A MEMBER OF EBS SUPPORT SERVICES LLC AND HAS A 13 81% INTEREST EBS SUPPORT SERVICES WAS CREATED FOR THE PURPOSE OF LEASING PERSONNEL AND PROVIDING SHARED ADMINISTRATIVE SERVICES TO ITS MEMBERS THE APPORTIONED MANAGER OF EBS SUPPORT SERVICES IS THE PRESIDENT AND DIRECTOR OF TCSTG THREE KEY EMPLOYEES OF EBS SUPPORT SERVICES DEVOTE PART OF THEIR TIME TO TCSTG BUSINESS JOHN SCHWARTZ, ADAM MILLER, AND PATRICIA DWYER TCSTG REIMBURSES EBS SUPPORT SERVICES FOR THE COST OF THE LEASED PERSONNEL, INCLUDING KEY EMPLOYEES THE AMOUNT LISTED ABOVE INCLUDES ALL COMPENSATION AND BENEFITS PAID TO THESE KEY EMPLOYEES THE AMOUNT LISTED ABOVE ALSO INCLUDES SALARY AND BENEFITS FOR OTHER SHARED EMPLOYEES AS WELL AS REIMBURSEMENT FOR SUCH ITEMS AS SHARED OFFICE SPACE, EQUIPMENT, AND OTHER OPERATING EXPENSES TOTAL AMOUNT PAID TO EBS SUPPORT SERVICES 193,945 PERSONNEL COSTS 115,631 PAYROLL TAXES & BENEFITS 27,352 OTHER OPERATING EXPENSES 40,000 RENT 10,962

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
TWIN CITIES SCHOOLS' TELECOMMUNICATIONS GROUP	41-1804970

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	THE CORPORATION IS ORGANIZED AND WILL BE OPERATED EXCLUSIVELY FOR "CHARITABLE, SCIENTIFIC AND EDUCATIONAL- AND "SOCIAL WELFARE" PURPOSES WITHIN THE MEANING OF SECTIONS 501(C)(3) AND 501(C)(4), RESPECTIVELY, OF THE INTERNAL REVENUE CODE TO THIS END, THE NONPROFIT SHALL UNDERTAKE ACTIVITIES TO SUPPORT THE PROVISION OF QUALITY AND DIVERSE INSTRUCTIONAL MEDIA CONTENT AND CAPABILITIES TO EDUCATORS AND STUDENTS, INCLUDING, BUT NOT LIMITED TO, DATA SERVICES AND INSTRUCTIONAL VIDEO PROVIDED TO ACCREDITED EDUCATIONAL INSTITUTIONS AND GOVERNMENTAL ORGANIZATIONS ENGAGED IN THE FORMAL EDUCATION OF ENROLLED STUDENTS FOSTER OPEN, HONEST AND OUTSPOKEN MEDIA THAT HELP USERS TO BE A POPULAR DEMOCRATIC CHECK ON BOTH GOVERNMENT POWER AND CONCENTRATED PRIVATE PRIVILEGE, EXPAND THE DISSEMINATION OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM, THAT OFFER DISSENTING, ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE INFORMATION AND CONCEPTS TO THE MARKETPLACE OF IDEAS IN BOTH LOCAL AND GLOBAL CONTEXTS, ENGAGE IN ADDITONAL SOCIAL WELFARE, CHARITABLE, SCIENTIFIC, AND/OR EDUCATIONAL ACTIVITIES AS ARE CONSISTENT WITH OPERATIONS THAT MAY BE UNDERTAKEN BY ORGANIZATIONS DESCRIBED IN, AND THUS EXEMPT FROM TAXATION UNDER, SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE, AS NOW ENACTED OR HEREAFTER AMENDED

Return Reference	Explanation
FORM 990	BACKGROUND THESE ADDITIONAL, VOLUNTARY DISCLOSURES ARE INTENDED TO GIVE THE INTERESTED READER GREATER INSIGHT INTO HOW AND WHY TWIN CITIES SCHOOLS' TELECOMMUNICATIONS GROUP, INC , D/B/A VOQAL TWIN CITIES OPERATES ITS NUMEROUS PROGRAMS AND INITIATIVES, BOTH THROUGH ITS OWN EFFORTS AND THROUGH THE LIMITED LIABILITY COMPANIES OF WHICH VOQAL TWIN CITIES IS PART OWNER ON BEHALF OF A NUMBER OF NONPROFIT ORGANIZATIONS, VOQAL TWIN CITIES' PRESIDENT, JOHN SCHWARTZ, LED AN EFFORT TO APPLY FOR WHAT WERE THEN REFERRED TO AS INSTRUCTIONAL TELEVISION FIXED SERVICE (ITFS) LICENSES FROM THE FEDERAL COMMUNICATIONS COMMISSION THOSE APPLICATIONS WERE ORIGINALLY SUBMITTED IN THE EARLY 1980S MR SCHWARTZ BELIEVED THAT SEPARATE NONPROFIT ORGANIZATIONS WITH LOCAL BOARDS OF DIRECTORS WOULD BETTER SERVE THE SCHOOLS AND COMMUNITIES COVERED BY THESE LICENSES IN THE END, FIVE NONPROFITS LED BY MR SCHWARTZ APPLIED FOR AND RECEIVED A TOTAL OF 11 ITFS LICENSES TODAY, MR SCHWARTZ REMAINS THE PRESIDENT OF THOSE FIVE NONPROFITS, WHICH WILL HEREAFTER BE REFERRED TO AS THE VOQAL NONPROFITS VOQAL TWIN CITIES IS ONE OF THOSE FIVE FOR OVER TWO DECADES, VOQAL TWIN CITIES PROVIDED FREE EDUCATIONAL VIDEO PROGRAMMING TO SCHOOLS VIA ITS FCC-LICENSED ITFS STATION WHILE DOING SO, IT SHARED SOME OF ITS OVERHEAD AND ADMINISTRATIVE COSTS WITH THE OTHER FOUR VOQAL NONPROFITS, WHICH WERE PROVIDING VERY SIMILAR SERVICE TO THEIR LOCAL COMMUNITIES THIS APPROACH RESULTED IN SIGNIFICANT COST SAVINGS, ALLOWING VOQAL TWIN CITIES TO DELIVER BETTER EDUCATIONAL SERVICE THE SHARING OF PERSONNEL AND OTHER RESOURCES AMONG THE VOQAL NONPROFITS WAS THE BEGINNING OF WHAT WOULD LATER BECOME EBS SUPPORT SERVICES, LLC (EBSSS) - THE UMBRELLA SERVICE ORGANIZATION THAT TODAY PROVIDES PERSONNEL AND OPERATIONAL SUPPORT TO ALL FIVE VOQAL NONPROFITS TO EXPAND THEIR ABILITY TO SERVE EDUCATION AND OTHERWISE BENEFIT THE PUBLIC, THE VOQAL NONPROFITS ENTERED INTO VARIOUS SPECTRUM USE AGREEMENTS WITH COMMERCIAL TELECOMMUNICATIONS OPERATORS VOQAL ALLOWED COMMERCIAL FIRMS TO USE THEIR ITFS, AND, LATER, EDUCATIONAL BROADBAND SERVICE (EBS) EXCESS SPECTRUM CAPACITY IN THEIR WIRELESS NETWORKS IN EXCHANGE, THESE AGREEMENTS PROVIDED SIGNIFICANT FINANCIAL BENEFITS THROUGH SPECTRUM ROYALTY PAYMENTS, AS WELL AS MATERIAL IN-KIND EDUCATIONAL BENEFITS SUCH AS HIGH- SPEED BROADBAND INTERNET ACCOUNTS THE VOQAL NONPROFITS' CURRENT SPECTRUM AGREEMENTS ARE WITH A SPRINT SUBSIDIARY WITH THE INCREASED RESOURCES AFFORDED BY THESE MOST RECENT SPECTRUM AGREEMENTS, THE VOQAL NONPROFITS, INCLUDING VOQAL TWIN CITIES, EXPANDED THE NUMBER AND REACH OF THEIR EDUCATIONAL PROGRAMS TO INCLUDE NEW EDUCATION VENTURES, AFFORDABLE INTERNET SERVICE FOR SCHOOLS AND NONPROFITS, CASH GRANTS, EBS SPECTRUM ADVOCACY, AND MORE AS IT EXPANDED, VOQAL TWIN CITIES CONTINUED TO SHARE RESOURCES WITH THE OTHER VOQAL NONPROFITS FOR THIS REASON, IN 2009 THE FIVE VOQAL NONPROFITS FORMED EBS SUPPORT SERVICES, LLC VOQAL TWIN CITIES OWNS 13 81% OF EBS SUPPORT SERVICES, LLC AND REIMBURSES IT FOR THE COST OF LEASED PERSONNEL, AS WELL AS SHARED OFFICE SPACE AND EQUIPMENT EBSSS, LLC, AS WELL AS THE OTHER LIMITED LIABILITY COMPANIES LISTED BELOW, ARE ALL OWNED EXCLUSIVELY BY THE VOQAL NONPROFITS, THERE ARE NO OTHER OWNERS IN 2013, TO EXTEND THESE RELATIONSHIPS AND GAIN BETTER PUBLIC RECOGNITION FOR SHARED WORK, EBSSS SECURED THE "VOQAL" TRADEMARK AND THE FIVE NONPROFITS, INCLUDING VOQAL TWIN CITIES, ADOPTED THE VOQAL BRAND VOQAL HAS STRIVED TO FULFILL THE MISSION OF EBS, FROM ITS BEGINNINGS PROVIDING FREE, ITFS VIDEO TO SCHOOLS TO RECENT EFFORTS TO SUPPORT CHANGE- MAKERS IN EDUCATION WHILE SOME VOQAL TWIN CITIES PROGRAMS SERVE WHAT MANY WOULD CONSIDER TRADITIONAL EDUCATIONAL ENTITIES LIKE K-12 SCHOOLS, VOQAL EMBRACES A BROADER VIEW OF EDUCATION AND AIMS TO ENSURE EQUAL ACCESS TO KNOWLEDGE TO FOSTER A STRONGER, HEALTHIER DEMOCRACY OUR PROGRAMS ARE OFTEN AIMED AT THE ROOT CAUSES THAT BAR ACCESS TO KNOWLEDGE BOTH IN AND OUT OF TRADITIONAL BRICK AND MORTAR INSTITUTIONS EXAMPLES OF MORE TRADITIONAL EDUCATIONAL PROGRAMS INCLUDE OUR CORE BROADBAND INTERNET ACCOUNTS AND MOBILE CITIZEN'S EFFORTS TO ENSURE THAT STUDENTS HAVE ACCESS TO THE INTERNET BOTH AT SCHOOL AND AT HOME VOQAL EDUCATION'S SUPPORT OF THE CRASH COURSE SERIES ON YOUTUBE AND INDEPENDENT SPECTRUM'S EFFORTS TO PASS THROUGH ADDITIONAL EDUCATION BENEFITS TO MORE EBS LICENSEES ARE ADDITIONAL EXAMPLES OF THE EDUCATIONAL NATURE OF OUR WORK EXAMPLES OF SOME OF OUR LESS TRADITIONAL EDUCATIONAL ENDEAVORS INCLUDE THE EFFORTS OF VOQAL FUND AND VOQAL FELLOWSHIP, WHICH ARE RELATED TO EDUCATION IN THE BROADER SENSE OF SUPPORTING THE DISSEMINATION OF ALTERNATIVE IDEAS AND BUILDING A MORE ENGAGED AND EDUCATED PUBLIC A DESCRIPTION OF SPECIFIC VOQAL TWIN CITIES PROGRAMS IS BELOW CORE BROADBAND INTERNET ACCOUNTS - OPERATED INDEPENDENTLY BY VOQAL TWIN CITIES AND ADMINISTERED BY EBSSS, LLC VOQAL TWIN CITIES PROVIDES SIX SCHOOLS IN THE MINNEAPOLIS-ST PAUL AREA WITH OVER 105 FREE AND ONE SUBSIDIZED HIGH-SPEED WIRELESS BROADBAND INTERNET ACCOUNTS THE SCHOOLS ARE BOTH PUBLIC AND PRIVATE, SERVICING GRADES K-12 THE ACCOUNTS ARE DISTRIBUTED TO BOTH TEACHERS AND STUDENTS ACCOUNTS PLACED WITH STUDENTS ALLOW THOSE STUDENTS TO COMPLETE SCHOOLWORK ONLINE AT HOME THAT MIGHT OTHERWISE HAVE TO BE COMPLETED AT PUBLIC LIBRARIES, COFFEE SHOPS WITH WI-FI ACCESS OR OTHER PLACES THAT MIGHT NOT BE CONVENIENT DURING NON-SCHOOL HOURS WE ESTIMATE THAT THE FAIR MARKET VALUE OF THESE FREE ACCOUNTS IS OVER 63,000 ANNUALLY 2015 WAS A PARTICULARLY CHALLENGING YEAR AS SPRINT REPLACED A PRIOR NETWORK TECHNOLOGY WITH 4G LTE AS A RESULT, ALL DEVICES VOQAL TWIN CITIES HAD PLACED IN SCHOOLS HAD TO BE REPLACED VOQAL TWIN CITIES ELECTED TO DONATE THE EQUIPMENT TO THE SCHOOLS THE ESTIMATED VALUE OF THE FREE REPLACEMENT EQUIPMENT WAS ABOUT 15,750 AS OF MARCH 2016, ALL SIX TWIN CITIES-AREA SCHOOLS WERE TRANSITIONED TO THE NEW TECHNOLOGY VOQAL EDUCATION - OPERATED BY VOQAL TWIN CITIES AND OTHER VOQAL NONPROFITS, ADMINISTERED BY EBSSS, LLC VOQAL EDUCATION IS PROUD TO BE A FUNDER OF CRASH COURSE - GOVERNMENT AND POLITICS CRASH COURSE IS AN EDUCATIONAL YOUTUBE CHANNEL FEATURING 10- MINUTE VIDEOS THAT CONDENSE COMPLEX TOPICS INTO QUIRKY, ENGAGING TUTORIALS CRASH COURSE'S YOUTUBE CHANNEL HAS NEARLY 3 MILLION SUBSCRIBERS, AND THE VIDEOS ARE SHOWN IN CLASSROOMS ACROSS THE COUNTRY, AS WELL AS WATCHED BY THE PUBLIC AT LARGE VOQAL TWIN CITIES PARTLY FUNDED CRASH COURSE'S GOVERNMENT AND POLITICS SERIES, WHICH HAS BEEN VIEWED WELL OVER NINE MILLION TIMES ACROSS ITS 50 EPISODES VOQAL EDUCATION'S NEWEST EFFORT, THE EDUCATION VENTURE FUND, SEEKS TO CONNECT EARLY STAGE INVESTORS AND DONORS TO BOTH NONPROFIT AND FOR-PROFIT TECHNOLOGY STARTUPS WITH THE GOAL OF REDUCING OPPORTUNITY GAPS IN EDUCATION 2016 WAS THE FIRST YEAR IN WHICH THE EDUCATION VENTURE FUND MADE INVESTMENTS, WITH VOQAL TWIN CITIES INVESTING A TOTAL OF 35,000 IN THREE DIFFERENT COMPANIES, AS WELL AS PAYING A PORTION OF THE OPERATING COSTS THE INVESTMENTS RANGE FROM A COMPANY THAT CONNECTS INDUSTRY PROFESSIONALS WILLING TO VOLUNTEER TIME WITH TEACHERS WHO SEEK TO EXPOSE THEIR STUDENTS TO STEM ROLE MODELS TO A FIRM THAT DEVELOPS TECHNOLOGY THAT ENABLES TEACHERS TO ADAPT LESSON PLANS FOR STUDENTS WITH DISABILITIES MOBILE CITIZEN, LLC - OWNED IN PART (8 9%) BY VOQAL TWIN CITIES MOBILE CITIZEN, LLC IS MADE POSSIBLE BY THE VOQAL NONPROFITS' CURRENT SPECTRUM AGREEMENTS AND THE BROADBAND INTERNET ACCOUNTS RECEIVED AS PART OF THOSE AGREEMENTS AFTER SEVERAL YEARS OF PROVIDING INTERNET SERVICE INDIVIDUALLY, THE VOQAL NONPROFITS FORMED MOBILE CITIZEN, LLC TO PROVIDE ADMINISTRATIVE SUPPORT FOR THE DISTRIBUTION OF SOME OR ALL OF ITS MEMBERS' BROADBAND ACCOUNTS MOBILE CITIZEN, LLC SERVES SCHOOLS, NONPROFIT ORGANIZATIONS AND SOCIAL WELFARE AGENCIES AND HAS FOCUSED MUCH OF ITS EFFORT ON BRIDGING THE DIGITAL DIVIDE MOBILE CITIZEN OFFERS ONE OF THE LOWEST COST MOBILE BROADBAND RATE PLANS AVAILABLE TO SCHOOLS, NONPROFIT ORGANIZATIONS AND SOCIAL WELFARE AGENCIES NATIONWIDE, WITH FEW RESTRICTIONS AND NO DATA THROTTLING MOBILE CITIZEN WIRELESS BROADBAND SERVICE COSTS APPROXIMATELY ONE-FIFTH THE AMOUNT OF ITS COMMERCIAL EQUIVALENTS, AND IS PROVIDED FREE IN SOME CASES IN THE TWIN CITIES AREA, MOBILE CITIZEN SERVES SCHOOLS AND NONPROFITS RANGING FROM COMPUTER REFURBISHERS TO MINORITY TRAINING ORGANIZATIONS THE MONEY THESE ORGANIZATIONS SAVE ON THE INTERNET WITH MOBILE CITIZEN ALLOWS THEM TO PUT THOSE DOLLARS TO USE FULFILLING THEIR ORGANIZATION'S MISSION ON BEHALF OF VOQAL TWIN CITIES, MOBILE CITIZEN PLACED 1,699 WIRELESS BROADBAND ACCOUNTS WITH SCHOOLS AND NONPROFITS BOTH LOCALLY IN MINNESOTA AND NATIONWIDE IN STATES SUCH AS WASHINGTON, COLORADO AND PENNSYLVANIA THE ESTIMATED MARKET VALUE OF THE DONATION OF FREE AND SUBSIDIZED ACCOUNTS IS MORE THAN 815,000 PER YEAR INDEPENDENT SPECTRUM, LLC - OWNED IN PART (9 1%) BY VOQAL TWIN CITIES AND MANAGED BY EBSSS, LLC ANOTHER BENEFIT OF THE CURRENT SPECTRU

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 2	THE ORGANIZATION PARTICIPATES IN THE EDUCATION VENTURE FUND AS DESCRIBED IN SCHEDULE O

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 3	THE ORGANIZATION CEASED EDUCATION ON DEMAND IN JULY 2015 THIS ENDED THE ERA OF VOQAL TWIN CITIES PROVIDING INSTRUCTIONAL CONTENT TO SCHOOLS

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4D	THE ORGANIZATION THROUGH ITS INVESTMENT IN AN UNRELATED ORGANIZATION TAXABLE AS A PARTNERSHIP UNDERTOOK ACTIVITIES TO EXPAND THE DISSEMINATION OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM, THAT OFFER DISSENTING, ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE INFORMATION AND CONCEPTS TO THE MARKETPLACE OF IDEAS IN BOTH LOCAL AND GLOBAL CONTEXTS

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 8B	THE ORGANIZATION DOES NOT HAVE A COMMITTEE WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	THE 990 IS REVIEWED BY THE ORGANIZATION'S ACCOUNTANTS, CFO, AND AT LEAST ONE CORPORATE OFFICER ADDITIONALLY THE FORM IS PRESENTED TO THE BOARD MEMBERS AFTER IT IS FILED

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	EACH RESPONSIBLE PERSON WHO IS A DIRECTOR OR OFFICER HAS A DUTY TO DISCLOSE TO THE BOARD (OR TO ANY COMMITTEE OF THE BOARD THAT IS CONSIDERING A DECISION TO WHICH THE CONFLICT APPLIED) THE MATERIAL FACTS OF ANY PROPOSED TRANSACTION OR ACTION OF THE ORGANIZATION IN WHICH SUCH RESPONSIBLE PERSON HAS ANY CONFLICTS EACH RESPONSIBLE PERSON WHO IS A STAFF MEMBER, HAS A DUTY TO DISCLOSE TO THE BUSINESS MANAGER OF THE ORGANIZATION AND HIS/HER IMMEDIATE SUPERVISOR THE MATERIAL FACTS OF ANY PROPOSED TRANSACTION OF THE ORGANIZATION IN WHICH SUCH PERSON HAS ANY CONFLICT IMPLEMENTATION OF THE CONFLICT OF INTEREST POLICY RELIES ON SUCH DISCLOSURE A RESPONSIBLE PERSON WHO FAILS TO FOLLOW THE PROTOCOLS ESTABLISHED IN THE CONFLICT OF INTEREST POLICY SHALL BE SUBJECT TO MEANINGFUL DISCIPLINARY ACTION BY THE BOARD OF DIRECTORS UP TO AND INCLUDING REMOVAL FROM THE BOARD OR THEIR POSITION WITHIN THE ORGANIZATION

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	ALL SERVICES ARE FROM SHARED EMPLOYEES OF A SHARED SERVICES COMPANY THIS COMPANY HAS AN OVERSIGHT COMMITTEE MADE UP OF BOARD MEMBERS OF NOT-FOR-PROFIT ORGANIZATIONS THAT IT SERVES THIS OVERSIGHT COMMITTEE HAS BEEN CHARGED BY THE NONPROFIT ORGANIZATION BOARDS TO OVERSEE PERSONNEL MATTERS INCLUDING EXECUTIVE AND STAFF COMPENSATION STAFF PREPARED A SEMI- ANNUAL SALARY BENCHMARKING REPORT FOR ALL STAFF POSITIONS AND AN ANNUAL CEO SALARY REVIEW THAT DESCRIBED EACH POSITION AND COMPARED THE POSITION TO THREE SALARY SURVEYS MOUNTAIN STATES EMPLOYERS COUNCIL 2014 NON- PROFIT/FOUNDATION COMPENSATION, MOUNTAIN STATES EMPLOYERS COUNCIL 2015 COLORADO BENCHMARK COMPENSATION, AND 2014 COLORADO NON-PROFIT ASSOCIATION SALARY BENEFITS SURVEY IN ADDITION, THE SALARY BENCHMARKING REPORT WAS REVIEWED BY AN INDEPENDENT THIRD PARTY CONTRACTOR TO ENSURE THE USE OF PROPER METHODOLOGY AND ETHICAL STANDARDS THESE SALARIES ARE EFFECTIVE FOR THE FISCAL YEAR 2016 THIS REPORT, THE THIRD PARTY CONTRACTOR REPORT AND SUPPORTING DOCUMENTATION WAS REVIEWED IN DEPTH BY THE OVERSIGHT COMMITTEE WHICH SUMMARIZED ITS REVIEW TO ALL OF THE BOARDS

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15B	SEE THE EXPLANATION SHOWN FOR FORM 990, PART VI, LINE 15A

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
TWIN CITIES SCHOOLS'
TELECOMMUNICATIONS GROUP

Employer identification number

41-1804970

Part I **Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No

Part III **Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

			Yes	No
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity . . .	1a		
b	Gift, grant, or capital contribution to related organization(s) . . .	1b		
c	Gift, grant, or capital contribution from related organization(s) . . .	1c		
d	Loans or loan guarantees to or for related organization(s) . . .	1d		
e	Loans or loan guarantees by related organization(s) . . .	1e		
f	Dividends from related organization(s) . . .	1f		
g	Sale of assets to related organization(s) . . .	1g		
h	Purchase of assets from related organization(s) . . .	1h		
i	Exchange of assets with related organization(s) . . .	1i		
j	Lease of facilities, equipment, or other assets to related organization(s) . . .	1j		
k	Lease of facilities, equipment, or other assets from related organization(s) . . .	1k		
l	Performance of services or membership or fundraising solicitations for related organization(s) . . .	1l		
m	Performance of services or membership or fundraising solicitations by related organization(s) . . .	1m		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .	1n		
o	Sharing of paid employees with related organization(s) . . .	1o		
p	Reimbursement paid to related organization(s) for expenses . . .	1p		
q	Reimbursement paid by related organization(s) for expenses . . .	1q		
r	Other transfer of cash or property to related organization(s) . . .	1r		
s	Other transfer of cash or property from related organization(s) . . .	1s		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	**No**			**Yes**	**No**		**Yes**	**No**	
(1) INDEPENDENT SPECTRUM LLC PO BOX 6060BOULDER, CO 80306 41-2183115	EDUCATION	CO	ROYALTIES		No	294,618	497,303		No			No	9 100 %

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation